



Finger Lakes Community College  
Educational Opportunity Program  
3325 Marvin Sands Drive  
Canandaigua, NY 14424-8395

p: (585) 785-1390  
f: (585) 785-1780  
eop@flcc.edu  
flcc.edu/eop

**EOP Transfer Applicant Information Sheet**

Please complete all sections of this form. The information you provide will allow us to verify your previous Opportunity Program status and to make a final decision on your admission to EOP at FLCC. This form **must be returned** in order for us to review your eligibility and finalize your EOP admission.

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Please circle Yes or No:**

Yes / No I am currently a New York State resident.

Yes / No I earned an associate or bachelor's degree since leaving FLCC.

Yes / No I am in default on a federal student loan.

Yes / No I was previously admitted to a college under an Opportunity Program. *(If "yes," complete the section below.)*

List all colleges and terms attended and indicate participation in an Opportunity Program such as EOP, HEOP, Seek/College Discovery, etc.

College: \_\_\_\_\_ Terms: \_\_\_\_\_ (H)EOP? (Y/N)\_\_\_\_\_

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