



## I'm interested—what's next?

Program slots are limited. To be considered, complete the following application as soon as possible. You will then be invited to an Information Session for further details.

## **ASAP Enrollment Form**

Please don't fill out this input box.
First Name*
Last Name*
SUNY Erie ID * Example: N00123456
Personal Email address*
Cell Phone*
Are you a parent of a child that is attending a licensed day care? $\ensuremath{^*}$
Please Select   ▼
How many college credits have you earned?*  © 0
○ 1-30
O 31 or more
O I am not sure

What describes your educational plans? <sup>↑</sup> I plan on earning an Associate Degree at SUNY Erie
O I plan to transfer BEFORE earning my Associate Degree at SUNY Erie
O I am not sure
Have you completed your 2024-2025 FAFSA and TAP application?*  O Yes
O No
O I do not plan on applying for financial aid
Upload confirmation of your completed 2024-2025 FAFSA (Screenshot of confirmation email or message at end of application submission suffices)

## **Program Requirements**

To participate in ASAP and receive the program benefits, you must agree to the following:

- Enroll full-time each semester and maintain good academic standing
- Enroll immediately and continuously in any developmental courses required
- Meet regularly with your advisor and attend any required enrichment activities
- Complete the Free Application for Federal Student Aid (FAFSA) and the New York State Tuition Assistance Program (TAP) application each year, to remain eligible
- Graduate within three years

Participation Agreement\*

I have read and agree to the program requirements above to participate in the ASAP program and would like to participate in the Fall 2024 semester.

<sup>\*\*</sup>Submit form VIA EMAIL to: annesic@ecc.edu