

Western Suffolk BOCES
 Postsecondary Health Careers
 152 Laurel Hill Road, Northport, NY 11768
 (631) 261-3721

Admissions Application

Work Experience: (List most recent first)				
Job Title	Employer Name	Address	Position Held	Dates Employed
1.				
2.				
3.				

References: (Non-Relative) Two Business or Academic, One Personal				
Name	Title	Company	Email	Relationship to Applicant
1.				
2.				
3.				

I certify that all of the information submitted on this application is correct.
I have advised the school of any past criminal record, history of substance abuse, proven patient abuse or other conditions that would potentially impact upon my performance in the clinical setting.
I understand that the \$100 application fee is non-refundable.

Signature: _____ **Date:** _____

Non-Discrimination Notice

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