



Application for Admission

Return this form to Diane Staunton by mail: UBEOC Admissions, 555 Ellicott Street, Buffalo, NY 14203 or by fax (716)842-0297

Court Assistant Exam Preparation: circle which session you would like to attend

August 19 - September 30: (Every Saturday) from 9:00am – 12:00pm OR

September 18th – September 29th (Mon., Wed., & Fri.) from 5:30 – 8:30pm

What is your exam confirmation number? _____

Identification Information

Date: _____ SSN: _____ Date of Birth: _____

Name: _____
(Last) (First) (Middle) (Suffix e.g. Jr., Sr.) (Previous Last Name)

Mailing Address: _____
(Street, PO Box, Apt. #, etc.) (City) (State) (Zip) (County)

Alternate (Permanent) Address: _____
(Street, PO Box, etc.) (City) (State) (Zip) (County)

Home Phone: (_____) _____ Cell Phone: (_____) _____

E-mail Address: _____

How did you hear about EOC? _____

Biographic Information

Gender: () Male () Female Marital Status: () Unmarried () Married

Are you a New York State resident? () Yes () No **If yes**, but for less than one year, how many months? ____

Are you a U.S. citizen? () Yes () No **If no**, are you a Permanent Resident? () Yes () No
(Please provide alien registration card if you are a permanent resident.)

Have you served in the U.S. military? () Yes () No

Are you Hispanic/Latino? () Yes () No

What is your race? (Choose all that apply.)

() American Indian/Alaskan Native () Asian () Black or African American
() Native Hawaiian or Other Pacific Islander () White

Student Signature: _____ Date _____

Please Note: You will receive confirmation of registration by e-mail. If you do not receive confirmation, contact Diane Staunton at 645-8875. **EOC will accept the first 25 registrants into each class.**