

PERSONAL DATA SHEET FOR USCG LICENSE STUDENTS			
Full Name: First, Middle, Last			
DATE OF BIRTH	Month	Day	Year
SSN		Maritime ID#	
Home Phone #		Cell Phone #	
SCHOOL EMAIL			
YEAR ENTERED MARITIME COLLEGE	August	January	
EXPECTED GRADUATION DATE	Month and Year:		
LICENSE OPTION	DECK <i>OR</i> ENGINE	Unlimited <i>OR</i> Limited	GRADUATE PROGRAM
CITIZENSHIP	<input type="checkbox"/> US	<input type="checkbox"/> FOREIGN	<input type="checkbox"/> RESIDENT ALIEN
IF FOREIGN OR RESIDENT ALIEN, COUNTRY OF CITIZENSHIP			
DO YOU HOLD A CADET MMC? <input type="checkbox"/> YES <input type="checkbox"/> NO			
LIST ANY USCG DOCUMENTS YOU HOLD OR HAVE PREVIOUSLY BEEN ISSUED: IF NONE, ENTER "NONE"			
SUMMER SEA TERMS: Indicate the dates your participated in Summer Sea Terms			
SST I (MUG Cruise)	Year:	<input type="checkbox"/> A	<input type="checkbox"/> B
SST II (2 nd Class Cruise)	Year:	<input type="checkbox"/> A	<input type="checkbox"/> B
OR CADET SHIPPING in lieu of SST II	Dates:		
SST III (1 ST Class Cruise)	Year:		
# of TSES Maintenance Modules taken:	0 1 2 3 4 (circle one) 1 module = 7.5 days		
Seminar taken?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Dates:	
I authorize SUNY Maritime College, and any representatives of Maritime College, to release any information, documents, and an official transcript of my academic record to the United States Coast Guard, if requested.			
Student Signature		Date	

Revised 9/16

OFFICE OF STUDENT AFFAIRS

6 Pennyfield Avenue, Throggs Neck, NY 10465 | 718.409.7496 | www.sunymaritime.edu