



State University of New York

College at
Oneonta

100 Netzer Admin. Building

Phone: 607-436-3390

Fax: 607-436-3392

Office Hours

Monday: 11am-4:30pm

Tuesday-Friday: 8am-4:30pm

Request for Academic Review

for Students Who Did Not Complete a Degree

Name: _____ ID#: _____

Address: _____ Phone: _____

_____ Email: _____

_____ Fax (if available): _____

Information Requesting: _____

Major you want evaluation for: _____

Date of last attendance at Oneonta: _____

College work completed since leaving Oneonta: _____

Information to be sent to (select one):

****Note:** We consider regular mail to be the most confidential.

Mailed (if address different than above, please provide the address):

Fax: _____

Email: _____

Student Signature: _____

Date: _____