

Immunization & Meningococcal Disease Information

According to New York State Public Health Law (NYS PHL) §2167, JCC is required to maintain a record of the following for each student: **A response to receipt of meningococcal disease and vaccine information** signed by the student or student's parent or guardian. This must include information on the availability of meningococcal meningitis vaccine **and** either 1) **a record of meningococcal meningitis immunization** within the past 10 years, or 2) **an acknowledgement of meningococcal disease risks and refusal of meningococcal meningitis immunization** signed by the student or student's parent or guardian.

Complete JCC's Certificate of Immunization/Acknowledgement of Meningitis Information form, available at the JCC health center on the campus you are attending or downloaded from www.sunyjcc.edu. According to New York State Public Health Law, no institution shall permit any student to attend the institution in excess of 30 days without complying with this law. The cost of the vaccine may be covered by the individual's health insurance policy.

To learn more about meningitis and the vaccine, contact the JCC health center and/or your physician. Additional information about the disease is available at the New York State Health Department (www.health.state.ny.us), the Centers for Disease Control and Prevention (CDC) (www.cdc.gov/ncidod/dbmd/diseaseinfo), and the American College Health Association (ACHA) (www.acha.org).

Students born on or after January 1, 1957: New York State Public Health Law 2165 requires post-secondary students attending colleges and universities to demonstrate proof of immunity to measles, mumps, and rubella. This law applies to anyone born January 1, 1957 or later who is taking six or more semester hours. Failure to do so will result in suspension and a \$25 fine. JCC's Certificate of Immunization/Acknowledgement of Meningitis Information form should be signed by a physician, unless you are attaching other legal proofs such as school records or county clinic records. For questions regarding immunizations, contact the campus health center at the site you are attending:

Cattaraugus County Campus: 716.376.7569 or Jamestown Campus, North County Center, Warren Center: 716.338.1013

Course Registration Form

Complete the following:

Course Registration Form Student Data Form Certificate of Residence (New York state residents only)

Mail completed forms to:

Cattaraugus County Campus: Jamestown Community College, Counseling & Career Planning Center,
260 N. Union St., PO Box 5901, Olean, NY 14760-5901

Jamestown Campus, North County Center, Warren Center: Jamestown Community College, Registrar's Office,
525 Falconer St., P.O. Box 20, Jamestown, NY 14702-0020

Do not send cash. Make check payable to Jamestown Community College. Payment in full must accompany forms.

SPRING 2010 REGISTRATION FORM for part-time students only (1-11 credits)

name _____ J-number or social security number _____

Complete registration form by providing information requested. Consult master schedule for course information. Example:

JM 3050 BIO 2510 4 Anatomy & Physiology I Bowman,Janis 830AM-945AM ..T.R.. ARSC 314 LR

Calculate tuition and fees. Make check payable to JCC. Be sure to check for lab fees if applicable.

CMP	CRN	SBJ	CR HRS	LAB FEE	COURSE TITLE

CREDIT CARD INFORMATION

credit card amount _____

card expiration date _____
month year

card (circle one)   

three-digit security code (found on back of card)

credit card number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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TUITION AND FEES (subject to change)

TUITION - \$151 x number of credits (NY residents) \$272 x number of credits (non-state residents)	\$
LAB FEES (see course listing)	
FSA FEES: \$8.25 per credit hour	
HEALTH SERVICES FEE: \$1.50 per credit hour	
TECHNOLOGY FEE FOR ON-CAMPUS COURSES: \$5 per credit hour	
SLN COURSE FEE FOR ONLINE COURSES: \$13 per credit hour	
TOTAL AMOUNT ENCLOSED	\$

