Create a login ID and password and click Login.

Create New User Login
Please create a Login ID and PIN. Your Login ID can be Your PIN can be up to 15 numeric characters. Min Create a Login ID: Create a PIN: Verify PIN:
Login Return to Homepage

Choose Senior Citizen Auditor from the application type menu and click Continue



Choose the Admission term (Fall 2020), enter your name in name fields and click Fill Out Application.

- indicates a r	equired field.	
Application Type:	Senior Citizen Auditor	
dmission Term:	* Fall 2020 V	
irst Name: *	Jane	
liddle Name:		
.ast Name: *	Doe	
Fill Out Applica	tion	

You should now be at the **Checklist**. These three sections ask for all the information we need to add you to the system as a Senior Auditor. Next, click on **Name**.

Select Application is Complete when you have completed the application. Select Finish Later if you would like to finish your application later.
Name Personal Information
Address and Phone
Application is Complete Finish Later
Need Help? Have Questions? Email Us!

In the name section, add any other relevant information and let us know if you've ever been with us before.

Name (Checklist iten	1 of 3)					
Enter your name information. Please use upper and lower case accor						
When completing sections, selecting Checklist saves your changes ar to Checklist without saving changes link to navigate to different section						
* - indicates a required	d field.					
Prefix:						
First Name:*	test					
Middle Name:						
Last Name:*	test					
Suffix:						
Previous Last Name:						
Previously Attended?:	● Yes ○ No ○ Not Reported					
Checklist Continue	Finish Later					

Click Continue to move on to Address and Phone.

Enter your address and other contact information and click **Continue** to move on to the **Personal Information** section.

Address and Phone (Checklist item 2 of 3)	
Reference of the state of the s	nce and zip code or a country code. Please use upper and lower case accordingly.
When completing sections, selecting Checklist saves your changes and displays	the Checklist. Continue moves to the next section. Finish Later saves your changes and displays th
* - indicates a required field.	
Permanent	
Street Line 1:*	
Street Line 2:	
City:*	
State:	New York 🗸
Zip Code:	
Nation:	None 🗸
Phone Number (xxxxxx)-(xxxxxxxxxxx) (xxxxxxxxx extension):*	:
Checklist Continue Finish Later	
Return to Checklist without saving changes	

Complete the personal information requested here and click **Continue.**

		· ·					
Enter your Personal Information	ation.						
When completing sections, Return to Checklist without	selecting Checklist saves saving changes link to na	your changes vigate to differe	and displays the Checklist. Continue moves to ent sections.	the next section. Finish Later saves your changes and displ	ays the Menu. Use the		
- indicates a required fie	eld.						
itizenship: *	None 🗸						
mail:*							
erify e-mail address:*							
ellular Phone Number	· · · · · · · · · · · · · · · · · · ·						
irth Date: *	Month None	V Day Nor	ne 🗸 Year (YYYY)				
SN (XXXXXXXX):							
ender: *	🔿 Male 🔿 Femal	9					
re you a NYS Resident?:	K 🔿 Yes 🔿 No						
Please indicate whether or r	ot you are Hispanic or La	ino					
Hispanic or Latino							
Not Hispanic or Latino							
Select one or more races to	indicate what you conside	r yourself to be					
American Indian or Alaska	Native	Asian	Black or African American	Native Hawaiian or Other Pacific Islander	White		
American Indian or Alaskan Native		Asian	Black or African American	Native Hawaiian or Other Pacific Islander	White		

You are now back at the **Checklist**. If you have additional information to submit, click back into the relevant area, otherwise click **Application is Complete**.

The next step is to **agree to the terms** of our Community Standards of Conduct and Liability and Refund policy.

In about 15 minutes, head over to <u>www.purchase.edu/reset</u> to activate your Purchase credentials.

You must agree to the terms below, or you will be directed back to the Menu page and your application will not be submitted. If you have questions, contact information can be found in the HELP link above.

I understand that withholding information requested on this application, including attendance at any other institution, or giving false information may make me ineligible for admission to the college or subject to dismissal. I have read this application and certify that the statements I have made on this application are correct and complete, including a report of all college work attempted or completed.

Your registration for course(s) means you assume responsibility for paying all tuition and fees associated with your registration. Unless you drop courses or withdraw from the College by the published deadlines, you are responsible for the charges even if you do not attend or log into a single class. The liability and refund policy is available on the Student Financial Services web page.

My acknowledgement below indicates that I understand that College policies including the Community Standards of Conduct as referenced in the Purchase College Student Handbook and the Institutional Response to Alcohol and Other Drugs are available online at http://www.purchase.edu/Policies.

I agree to the terms I do not agree

Next Steps

Home

Thank you for completing your Student Data Form.

To continue and register for classes you must first activate your Purchase user name, password and Purchase email account. Go to Current Students and under Quick Links on the right, choose Account Activation.

Once you have activated your user name and password, click the myHeliotrope link on the Current Students page and log on using your Purchase user name and password. You will find both the course search and online registration under the Student section of myHeliotrope.

Please note that your user name is generally your firstname.lastname. Your Purchase email account will be your firstname.lastname@purchase.edu.

More detailed directions and information on using the course search and registration system can be found on the Visting Student web page

We look forward to seeing you in classes.

If you require additional assistance please contact us at 914.251.7000 or Email us.

sseco3/1

Return to Menu