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UNDERGRADUATE 5((175 <)250

To be used by applicants who have previously D W W H O L G H G

3 O H D V H W \ S H R U S U L Q W O H J L E O \ D Q G F R P S O H W H E R W K V

6 R F L D O 6 H F X U L W \ 1 X P E H U

R S W L R Q D O U H T X L U H G I R U I H G H U D O W D [D Q G W W I D e n t i f i c a t i o n N u m b e r L Q J S X U S R V H V

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5 Return L Q J I R U:

F Fall _____ (year)
 F Spring _____ (year)
 F Summer _____ (year)

5 H W X U S L Q J

F Re H Q W U \ (5)
 F Visiting student (4)

Location:

F Macomb Campus F Online
 F WIU-Quad Cities

Last attended Western Illinois University _____ (term) _____ (year)

Anticipated Major: _____ Teacher education: F Yes F No

3 X E O L F \$ F W U H T X L U H G / R M K T U X W W K H H V R I H D F K S X E O L F X C Q W
 V W X G H Q W G H F O D U L I Q H L R U D F I D C H P L O F J P D M R U R U S U R J U D P R I V W X H W
 2 F F X S D V L X R M C O R N 5 H S R U W D V V R F L D W H G Z L W K W K D W P D M R U K N W O V P D M R U U
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Legal Name:

Last First Middle Former legal name, if any

Permanent address:

Phone:

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Street

Area Code

City State Zip County

Mailing address:

Phone:

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Street

Area Code

City State Zip

Cell Phone: _____ Date of birth: _____

MM/DD/YYYY

E-mail: _____

F U.S. Citizen

F Non U.S. Citizen

Specify country

Permanent resident number

Type of visa

In case of emergency, contact:

Name

Daytime phone

Evening Phone

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Area Code

Area Code

Address:

Street City State Zip

Relationship: F Parent F Guardian F Spouse F Other _____

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|-----------------------------|------|--------|--|
| Class | | Status | |
| ADST | ADPR | | |
| AHE | | | |
| WHA | | | |
| WHE | | | |
| WHP | | | |
| W-GPA | | | |
| W-Terms-TR | | | |
| Original Admission Type | | | |
| Original Matriculation Date | | | |
| No. Dism. | | | |
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| Hold A | | | |
| Date | | | |

YOU MUST COMPLETE BOTH SIDES OF THIS) 2 5 0

