



Bachelor of Arts in General Studies
Degree Program

Undergraduate
Application for Readmission
wiu.edu/BGS

Return to: School of Global Education & Outreach
Western Illinois University
Horrabin Hall Room 6
1 University Circle
Macomb IL 61455-1390
(309) 298-1929

Apply online at wiu.edu/admissions/apply_now
Select Readmission Application (General Studies Degree)

**WESTERN ILLINOIS UNIVERSITY BACHELOR OF ARTS IN GENERAL STUDIES DEGREE
APPLICATION FOR READMISSION**

PLEASE PRINT IN BLACK INK USING CAPITAL LETTERS

FOR OFFICE USE ONLY

WIU ID _____ - _____ - _____

Legal last name _____ First name _____ M.I. _____ Former legal name(s) _____

Permanent home address:

Street _____ City _____ State _____ Zip _____ County _____

Alternate mailing address, if different from home address:

Street _____ City _____ State _____ Zip _____

Gender: Male Female Date of birth: ____/____/____

Home phone: (____) ____-____ Cell phone: (____) ____-____ Email: _____

Social Security Number. _____ - _____ - _____

Please provide your social security number unless you are applying for Admission under Illinois Public Act 93-7. Your social security number is required for financial aid purposes.

Are you a U.S. Citizen? Yes No

If you selected no, please complete the following:

Country _____ Type of Visa _____

Will you have completed a minimum of one year active duty in the U.S. military? Yes No

If yes, submit copy of DD214 – copy with status of discharge Dates of service: ____ - ____ - ____ From ____ - ____ - ____ To

National Guard or Reserve Duty? Yes No If yes, enter start date of basic training ____ - ____ - ____

Ethnic/Race Background: Your responses to the following will assist our efforts to ensure race/ethnic compliance reporting with federal agencies. This information will not affect admission. Please indicate if you are Hispanic/Latino: Yes No

Please indicate your race (selecting one or more as appropriate): American Indian or Alaska Native Asian
 Black or African American Native Hawaiian or Other Pacific Islander White

I plan to take classes at WIU beginning: August (Fall) ____ Year January (Spring) ____ Year June (Summer) ____ Year

How did you learn about WIU's Bachelor of Arts in General Studies degree program?

- Military National Fire Academy Employer Friend/Relative Current BGS Student
 WIU Alumni Other Educational Institution Internet Search Welcome Back Postcard Educational fair
 Poster/Flyer WIU Advisor/ Faculty/ Staff Other - please explain: _____

Why did you choose WIU's Bachelor of Arts in General Studies degree program?

Previous Education

Graduation Type: GED High School Last High School attended or GED: _____

City _____ State _____

Month/Year Completed: _____

Please list ALL colleges or universities from which you have taken courses. *YOU MUST ALSO INCLUDE WIU AS A PREVIOUS UNIVERSITY ON YOUR LIST.* Please list in order of attendance. **Failure to list all colleges or universities attended could result in being denied admission to Western Illinois University.** If you have attended more than 8 colleges or universities, please attach an additional sheet, if necessary. You must provide official transcripts for any work not already on file with the WIU Office of the Registrar.

Please have official transcripts sent to the address below:
 General Studies Degree Program
 Horrabin Hall 6
 Western Illinois University
 1 University Circle
 Macomb, IL 61455-1390

The transcripts that are received from other institutions are for the purpose of admission to the BGS degree program only and cannot be released to a third party.

College or University	City	State	Date From MM/YYYY	Date To MM/YYYY	Hours Earned
1					
2					
3					
4					
5					
6					
7					
8					

Please list degrees you have previously earned (if any) and the institution where they were earned. If you have earned more than 3 degree, please attach an additional sheet, if necessary.

Degree Earned	Institution

NOTE: Students with Baccalaureate degrees from regionally accredited colleges or universities may not be admitted to the WIU Bachelor of Arts in General Studies (BGS) degree program.

Criminal Record Disclosure

Western Illinois University is committed to maintaining a safe and positive environment for all members of the University community. Therefore, you are required to disclose information regarding your criminal or disciplinary background.

1. Yes No Have you ever been convicted of, or been placed on court supervision for, any criminal offense? (This does not include routine traffic offenses.)
2. Yes No Do you have any criminal charges pending against you?
3. Yes No Have you ever been dismissed, or withdrawn while charges were pending, from any educational institution (including, but not limited to, high school or college) for any offense involving violence or threat of violence?

If you answered "yes" to any of the questions above, please submit via certified mail a description of the incident(s), including name, date of incident(s), location of incident(s), name of arresting agency(ies), as well as any additional relevant documentation. Additionally, please request the Circuit Clerk of the Court(s) in which the order of conviction(s) was entered to forward record(s) to: Western Illinois University, Sherman Hall Room 117, 1 University Circle, Macomb, IL 61455, attention to Campus Violence Prevention Enrollment Committee. These cases will be reviewed prior to an admission decision being made. Such disclosures do not automatically disqualify an applicant.

This application must be signed and dated by the applicant before action can be taken. I understand that withholding information requested on this application or by giving false information may make me ineligible for admission to the University or subject to dismissal. I certify that the information provided on the application is correct and complete.

Yes, I understand that **withholding** information requested on this application or giving **false** information may make me ineligible for admission to the University or subject to dismissal. I certify that the information provided on the application is correct and complete.

By signing this, I also certify that I have read, and will adhere to, all the components of the Criminal Records Disclosure Policy as stated.

Signature : _____

Date: ____/____/____

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