



WESTERN ILLINOIS UNIVERSITY

OFFICE OF THE REGISTRAR
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Macomb, IL 61455-1390

Phone: 309/298-1891
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Internet: www.wiu.edu

UNDERGRADUATE APPLICATION FOR READMISSION

To be used by applicants who have previously earned credit at WIU

Please type or print legibly and complete both sides.

Social Security Number (optional - required for federal tax and state reporting purposes)

Grid for Social Security Number

WIU Identification Number

Grid for WIU Identification Number

Applying to return:

- Fall (year)
Spring (year)
Summer (year)

Applying as:

- Readmission (5)
Visiting student (4)

Location:

- Macomb Campus
WIU-Quad Cities

Last attended Western Illinois University (term) (year)

Anticipated Major: Teacher education: Yes N

PERSONAL INFORMATION

Main application form with sections: Legal Name, Permanent address, Mailing address, Date of birth, U.S. Citizen status, Emergency contact, Daytime/Evening phone, Address, Relationship.

DO NOT WRITE IN THE SPACE BELOW

Vertical tracking table with columns: Class, Status, ADST, ADPR, AHE, WHA, WHE, WHP, W-GPA, W-Terms-TR, Original Admission Type, Original Matriculation Date, No. Dism., No Hold, Hold, Date.

YOU MUST COMPLETE BOTH SIDES OF THIS APPLICATION

EDUCATIONAL HISTORY

Name ALL colleges attended (including Western)			Dates of attendance				Hours earned or to be earned from each school
Name (in order of attendance)	City	State	From		To		
			Mo.	Yr.	Mo.	Yr.	
1.							
2.							
3.							
4.							
5.							
6.							

Degrees earned (if any): _____ TOTAL _____

Name of institution where earned: _____ HOURS _____

Have you served or are you serving on active duty with the armed forces? Yes No

Dates of service: From _____ To _____

National Guard or Reserve duty? Yes No

ETHNIC ORIGIN

Your response to the following will assist our efforts to ensure race/ethnic compliance reporting with federal agencies. This information will not affect admission.

1. Please indicate if you are Hispanic/Latino: Yes No

2. Please indicate your race. Select one or more, as appropriate.

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or other Pacific Islander

White

STUDENT CERTIFICATION

This certification must be signed and dated by the applicant before action can be taken on this application.

CERTIFICATION

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 statements I have made on this application are correct and complete.

SIGNATURE: _____ DATE: _____