



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 (required for federal tax and state reporting purposes)

Grid for Social Security number

WIU identification number

Grid for WIU identification number

Applying to return:

- Applying to return:
Fall (year)
Spring (year)
Summer (year)

Applying as:

- Applying as:
Readmission (5)
Visiting student (4)

Location:

- Location:
Macomb Campus
WIU Regional Center (Moline)

Last attended Western Illinois University (term) (year)

Anticipated Major: Teacher education: Yes N

PERSONAL INFORMATION

Main application form containing fields for Name, Permanent address, Mailing address, Date of birth, Citizenship, Illinois resident status, Emergency contact, Daytime/Evening phone, and Address.

DO NOT WRITE IN THE SPACE BELOW

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

YOU MUST COMPLETE BOTH SIDES OF THIS APPLICATION

ACADEMIC INFORMATION

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 _____

ETHNIC BACKGROUND

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: _____