

To be used by students who have applied and are currently accepted by the university.

WESTERN ILLINOIS UNIVERSITY
School of Extended Studies

Request to Register for Courses

WIU ID OR SOCIAL SECURITY NUMBER				NAME - Last		First		Middle		Former legal names, if any																														
ADDRESS			Street			City			State		Zip																													
If new check here <input type="checkbox"/>																																								
DATE OF BIRTH			PHONE			Home			Work																															
Month / Day / Year			Include Area Code () ()			() ()																																		
I WISH TO ENROLL: <input type="checkbox"/> Fall Year _____ <input type="checkbox"/> Spring Year _____ <input type="checkbox"/> Summer Year _____			STAR NUMBER <table border="1" style="width:100%; height: 40px;"> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> </table>																												Dept. Name		Course Number		Sem. Hours		Class Location		Instructor	
TYPE OF CREDIT <input type="checkbox"/> Graduate <input type="checkbox"/> Undergraduate <input type="checkbox"/> Audit <input type="checkbox"/> Pass-Fail (Undergraduate courses only)																																								

Admission

In order to register for course work through the School of Extended Studies at Western Illinois University, students must first apply and be currently accepted by the university. For instructions on how to apply as a new or returning student, visit <http://www.student.services.wiu.edu/admissions/application/index.asp>.

Distance Learning Instructional Enhancement Charge

Some distance learning courses, including online, independent study, and courses offered at an off-campus location, may be subject to a distance learning instructional enhancement charge of \$30 per semester hour. For more information visit www.wiu.edu/BOTdegree/current/iec.php.

Student Certification

I understand that it is my responsibility to comply with all university policies and procedures related to this request to register for courses. I understand submission of this request does not guarantee registration in the courses above, and I will be notified of the status of this request to register for courses. **This certification must be signed and dated by the applicant before action can be taken on this request.**

SIGNATURE _____ **DATE** _____

If you are registering for courses by mail, please return this completed form to;
OFFICE OF THE REGISTRAR WESTERN ILLINOIS UNIVERSITY, 1 UNIVERSITY CIRCLE, MACOMB, IL 61455-1390
 You may fax this completed form to (309)298-2976