

**FORMER STUDENT
WASHINGTON STATE UNIVERSITY
UNDERGRADUATE APPLICATION**

Send application to: Office of Admissions
Washington State University
PO Box 641067
Pullman WA 99164-1067

PLEASE:

1. Type or print in ink.
2. Have official transcripts mailed from all schools, colleges, and universities attended directly to the Office of Admissions at the address provided.
3. Sign and date application in #11.
4. To request disability accommodations in the application process, contact the WSU Disability Resource Center at 509-335-1726 or the Washington State Relay Service at 800-833-6388 (TDD).

1. To which Washington State campus are you seeking admission:

- Pullman (main residential campus) Tri-Cities (selected degrees) Spokane (selected degrees)
 Vancouver (main residential campus) **Extended Degree Program** (distance learning)

2. What is your immediate educational objective?:

- 1st Bachelor's Degree 2nd Bachelor's Degree Teacher Certification/Endorsement
 Courses for Personal Enrichment Other – Explain _____

3. For which year and term are you applying? **Write in one year and check one term only.**

Year _____ Spring Fall Summer/Fall (begin in summer and continue into fall)

4. I was last enrolled at WSU for the _____
Semester/Year

5. Do you plan to apply for financial aid from WSU? Yes No

Optional: If you know your WSU student ID #, please list |__|__|__|__|__|__|__|__|__|__|

PERSONAL DATA

6. Male Female

7. **Social Security Number** |__|__|__| - |__|__| - |__|__|__|__|

By law, providing your Social Security Number is optional, but it speeds up the processing of your admission and financial aid applications. It may also be used for educational research purposes. Releasing student information will be in accordance with all appropriate state and federal laws.

8. **Date of Birth** _____
Month/Day/Year

9. **Legal Name** _____
Last First Middle Jr., etc.

10. **Signature of Applicant** _____ **Date** _____
All information herein is complete, true, and accurate, and may be verified with the appropriate school/institution.

11. Former Name(s): If your first or last name has changed, indicate your former full name(s).

Last First Middle Jr., etc. | Last First Middle Jr., etc.

12. **Mailing Address** _____
Number and Street City State Zip

13. How long is your mailing address valid? _____ indefinitely or until _____
Month/Year

14. **Permanent Address** _____
(If Different) Number and Street City State Zip

15a. Telephone (_____) _____ - _____ 15b. Alternate or Business Telephone (_____) _____ - _____

16. Optional: E-Mail Address _____

17. Are you a resident of the state of Washington? No Yes: From _____ to _____
Month/Year Month/Year

18. Birthplace _____
City State Country if other than U.S.

19. Country of citizenship U.S.A. **Skip to #22a** Other: _____ **Go on to #20.**
Specify Country

20. Country of permanent residence? _____

21. Current U.S. visa type & date granted or resident alien number _____

22a. Are you an U.S. military veteran? Yes No 22a. Are you the child of a deceased veteran? Yes No

23. Are you an employee of Washington State University? Yes No

Since last enrolled at WSU, I have attended or will be attending the following institutions:

24. List in order of attendance and have **official transcripts** sent from all colleges or universities **you have attended since attending WSU**. Do not exclude or omit any colleges, regardless of how many credits you earned there or the nature of the program in which you were enrolled. Failure to disclose and submit complete and accurate information may result in the denial of admission or subsequent dismissal from Washington State University.

Name of College/University	City	State	Dates of Attendance From _____ To _____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

FAMILY INFORMATION

Questions #26-35 are optional for applicants 25 years of age or older.

Parent / Legal Guardian

25. Name: Mr/Mrs/Ms _____ <small>(Circle One) Last First</small>	26. Is s/he living? <input type="checkbox"/> Yes <input type="checkbox"/> No
27. Address _____ <small>Number and Street City State Zip</small>	28. Telephone (____) ____ - ____
29. What is parent's highest level of formal education completed?	
<input type="checkbox"/> Some High School	<input type="checkbox"/> High School Graduate
<input type="checkbox"/> 2-yr College Degree	<input type="checkbox"/> 4-yr College Degree
<input type="checkbox"/> College/University attended _____	<input type="checkbox"/> Some College
	<input type="checkbox"/> Postgraduate Study

Parent / Legal Guardian

30. Name: Mr/Mrs/Ms _____ <small>(Circle One) Last First</small>	31. Is s/he living? <input type="checkbox"/> Yes <input type="checkbox"/> No
32. Address _____ <small>Number and Street City State Zip</small>	33. Telephone (____) ____ - ____
34. What is parent's highest level of formal education completed?	
<input type="checkbox"/> Some High School	<input type="checkbox"/> High School Graduate
<input type="checkbox"/> 2-yr College Degree	<input type="checkbox"/> 4-yr College Degree
<input type="checkbox"/> College/University attended _____	<input type="checkbox"/> Some College
	<input type="checkbox"/> Postgraduate Study

35. Optional: What race do you consider yourself? (Check all that apply.)

<input type="checkbox"/> Aleut (941)	<input type="checkbox"/> Black/African American (870)
Asian American:	Pacific Islander:
<input type="checkbox"/> Asian Indian (600)	<input type="checkbox"/> Guamanian (660)
<input type="checkbox"/> Chinese (605)	<input type="checkbox"/> Samoan (655)
<input type="checkbox"/> Vietnamese (619)	<input type="checkbox"/> Hawaiian (635)
<input type="checkbox"/> Korean (612)	<input type="checkbox"/> Filipino (608)
<input type="checkbox"/> Japanese (611)	<input type="checkbox"/> Other Pacific Islander: _____
<input type="checkbox"/> Other Asian American: _____	<input type="checkbox"/> White/Caucasian (800)
	<input type="checkbox"/> Multicultural: _____

Specify tribal affiliation

Are you an enrolled member? Yes No

Parents represent different racial and/or ethnic groups. Please specify.

36. Optional: Are you of Spanish/Hispanic origin? (Check all that apply.)

No (999)
 Yes, Cuban (709)
 Yes, Mexican/Mexican American/Chicano (722)
 Yes, Puerto Rican (727)

Other Spanish/Hispanic: _____ Indicate one group. Example: Argentinian, Colombian, Nicaraguan, Salvadoran, Spaniard, etc.

Washington State University provides equal opportunity in education without regard to race, color, creed, religion, national origin, sex, age, disability, marital status, or status as a disabled veteran or Vietnam era veteran in accordance with institutional policies and applicable federal and state statutes and regulations.