

# University of Wisconsin-Waukesha ~ Continuing Education ~ Special Student Application

Mail to: Continuing Education, 1500 N. University Drive, Waukesha, WI 53188

_____				Social Security # _____
Last Name	First	Middle Initial	Previous Name	_____
_____		Street	_____	
Permanent Address		Birthday _____ (mo/day/yr)		
_____		County _____	_____	
City	State	Zip	Since (mo/yr)	

**Mailing address** if different from above—street, city, state, zip and dates \_\_\_\_\_ Home Phone \_\_\_\_\_

\_\_\_\_\_ Other Phone \_\_\_\_\_

**List former addresses** within the last two years: include street, city, state, zip and dates

\_\_\_\_\_ From (mo/yr): \_\_\_\_\_ To (mo/yr): \_\_\_\_\_

\_\_\_\_\_ From (mo/yr): \_\_\_\_\_ To (mo/yr): \_\_\_\_\_

## Educational Background

**Have you previously attended UW-Waukesha?**  Yes  No **If yes, semester/year:** \_\_\_\_\_

**High School** \_\_\_\_\_ **Year of Graduation** \_\_\_\_\_

Name of School \_\_\_\_\_ City/State \_\_\_\_\_

If you do not have a high-school diploma, have you passed the HSED/GED?  Yes  No If yes, Date: \_\_\_\_\_

List any education beyond high school. Include all college, technical school or university education beyond high school:

Name of School	City, State	Dates of Attendance (mo/yr-mp/yr)	Degree Earned
_____	_____	_____	_____
_____	_____	_____	_____

**Are you in good standing and eligible to return to all schools attended?**  Yes  No (If no, explain on an attached sheet)

## Residence Data

Have you, your spouse or someone claiming you as a dependent, moved to Wisconsin within the last year or plan to move to Wisconsin prior to the beginning of the term for which you are applying, in order to begin full-time employment in Wisconsin?

Yes  No

Do you claim legal Wisconsin residence for tuition purposes?  Yes, please complete:  No

I have lived continuously and only in Wisconsin since (mo/yr): \_\_\_\_\_

I have voted or registered to vote in (city/state): \_\_\_\_\_

I have held a driver's license only in Wisconsin since (mo/yr): \_\_\_\_\_

I have registered my motor vehicle(s) only in Wisconsin since (mo/yr): \_\_\_\_\_

I have filed a Wisconsin State Income Tax Return as a resident every year since (yr): \_\_\_\_\_

I am listed as a dependent on income tax forms of:  own, since \_\_\_\_\_  father's  mother's  parents

Parents address(es) for the last two years: \_\_\_\_\_

Street	City/State	From (mo/yr)	To (mo/yr)
_____	_____	_____	_____

## Term applying for:

- Summer  Fall  
 Spring  Winter

## Course(s) you wish to enroll in:

\_\_\_\_\_

## Applying for (check one):

- Special/New Student  
 Special/Re-entry Student  
 YOP/HSSP  
 Summer Session Only  
 Second Undergraduate Degree  
 Audit Only (Including OASDI Audit)  
 Senior Citizen (60+) Auditor

**Gender:**  Male  Female

## Citizenship:

- U.S. Citizen  
 Resident Alien  
Alien registration # \_\_\_\_\_  
(Attach copy of both sides of resident alien card)  
 Nonimmigrant Alien  
Visa Type: \_\_\_\_\_

## Racial/Ethnic Heritage (check one):

- African American/Black  
 American Indian or Alaskan Native  
Tribal affiliation \_\_\_\_\_  
 Cambodian, Laotian, Vietnamese  
 Other Asian/Pacific Islander  
 Hispanic/Latino  
 White/Non-Hispanic

**U.S. Veteran:**  Yes  No

I certify that the information on this application is true and complete. If additional information is needed to determine my eligibility for admission or my residence status, I will provide it upon request. I understand that inaccurate information may affect my admissibility. I also understand that admission as a Special Student carries no commitment on the part of the University to admit me at a later date as a degree candidate. If I enroll at this University, I will abide by its rules and regulations.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**