

SPECIAL STUDENT ADMISSION APPLICATION

\$50 application fee / Please type or print legibly

Social Security Number:	⁻	·				
Legal Name:		Middle				
First Address:				Last		
City		State		Zip		
Email:(Required)						
How did you hear about our	program?					
Have you attended WAU be	efore? No	Yes If ye	s, date last a	attended:		
Your name on WAU records	::					
Date of Birth:		Dem	ographic da	ata for statistica	l report: Mal	e Female
dacial/Ethnic Group:			Religious Affiliation:			
I wish to take the following	course(s): (MUST C	OMPLETE ALL SECTIO	NS)			
Course ID (i.e. HIST 125)		Course Title		Start Date	End Date	Campus/Online
		_				
Check all that is applicable f	or the above course	s:				
For	college credit	Pre freshman p	rogram	Visitin	g from anothe	er college
NOTE: Persons must not be Available courses: courses v			-	credits and the	n apply into a	program, if so des
Tuition and fees for special studies, or call 301-891-409	courses and seminal 2. Fax: 301-891-402	rs can be located at <u>ht</u> 3. Payment must be r	tp://www.v	with the busine		
online at WebAdvisor. To do	-	_	-		domic qualific	cation MALL avenue
Admission is granted withou every student to adhere to a Church. The student is respo www.wau.edu, select Acade	and respect the prin onsible for learning t	ciples and regulations hese principles and re	of WAU and gulations, w	d the standards hich can be fou	of the Seven	th-day Adventist demic bulletin:
of my knowledge, knowing t signature, I pledge to upholo	that withholding or i	misrepresenting infor	mation may	result in cance	llation of my r	egistration. By my