

**Center for Additional Teaching Licenses
 Special Student Admissions Application**

Semester you wish to enter _____ Birthdate _____ Social Security Number _____ <small>(month/year) (month/day/year)</small>					Application Status <u>2nd Undergraduate</u>	
Last Name _____		First _____		Middle _____	Previous Name _____	
Permanent Address _____			Street _____	City _____	State _____	Zip _____
e-mail address: _____		Since (mo/yr) _____	County of Residence _____			
Local Address (if different than Permanent) _____			Street _____	City _____	State _____	Zip _____
					Home Phone () _____	
					Local Phone () _____	
					Cell Phone () _____	

Gender male
 female

Citizenship
 U.S. Citizen
 Resident Alien

Alien Registration number: _____

 Non-Immigrant Alien
 Visa Type: _____

Racial/Ethnic Heritage
 African American/Black
 American Indian or Alaskan
 Native Tribal affiliation
 Cambodian, Laotian, Hmong,
 Vietnamese admitted to U.S. after
 12/31/75
 Other Asian/Pacific Islander
 Hispanic/Latino
 White/Non-Hispanic

U.S. VETERAN
 Yes No

EDUCATIONAL BACKGROUND

List in chronological order ALL college, technical school, university education beyond high school. Make sure you list the college/university of degree. Failure to list ALL schools may affect admissibility.

Name of School	City/State	From (mo/yr)	To (mo/yr)	Degree Earned

RESIDENCY DATA: This section must be completed for tuition purposes.

Are you a legal Wisconsin resident and/or do you claim legal Wisconsin residence for tuition purposes? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you, your spouse or parents recently moved to Wisconsin to begin fulltime employment? <input type="checkbox"/> Yes <input type="checkbox"/> No
I have lived continuously and only in Wisconsin since: (mo/yr) _____ / _____	Do you hold a valid Wisconsin driver's license? <input type="checkbox"/> No <input type="checkbox"/> Yes Since: (mo/yr) _____ / _____
Have you registered a motor vehicle(s) only on Wisconsin? <input type="checkbox"/> No <input type="checkbox"/> Yes Since: (mo/yr) _____ / _____	Have you filed a WI state income tax return as a resident for the past two years? <input type="checkbox"/> No <input type="checkbox"/> Yes What years? _____
Have you last voted or registered to vote in Wisconsin? <input type="checkbox"/> Yes <input type="checkbox"/> No When? (mo/yr) _____ / _____	

I certify that the information in 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.

_____ Applicant Signature _____ Date

FOR OFFICE USE ONLY

Admissions Decision
 _____ / _____

Res Nonres