

**APPLICATION FOR ADMISSION**

Full Legal Name \_\_\_\_\_ Sex \_\_\_ Age \_\_\_

Phone (H)(\_\_\_\_) \_\_\_\_\_ (W)(\_\_\_\_) \_\_\_\_\_ Email/Fax \_\_\_\_\_

Address \_\_\_\_\_

Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Social Security No. \_\_\_\_\_ Applicant's Date of Birth \_\_\_\_\_

Nearest relative or emergency contact \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Relationship \_\_\_\_\_

High School Diploma Yes \_\_\_ No \_\_\_ Graduation Equivalency Test [Yes] \_\_\_ [No] \_\_\_

Name, location and dates attended, degrees conferred at colleges/universities. Start with last school attended. Attach additional sheets, if necessary. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Indicate your field of intended study \_\_\_\_\_

Indicate your occupational objective(s) \_\_\_\_\_

Applying for: B.A. \_\_\_ M.A. \_\_\_ Ph.D. \_\_\_ Non-Degree Studies \_\_\_ Date you wish to enroll \_\_\_\_\_

Please contact all colleges/universities or high school if you plan to enroll for a B.A., and request that they send us your official transcripts. If you have less than two years of college work, please include your high school transcripts, GED.

Tell us in two or three pages, total (a) about yourself, past and present; (b) what you are most involved in or concerned with now; (c) what your goals are; (d) what plans you have for studying at Western Institute for Social Research. WISR requires two letters of recommendation.

WISR invites you to make an appointment to discuss your needs and goals and our programs before you apply.

**NOTICE OF NONDISCRIMINATORY POLICY AS TO STUDENTS:** Western Institute for Social Research admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin, gender or handicap in the administration of its educational policies, scholarships and loan programs and all other school administered programs.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Official Dates \_\_\_\_\_ / \_\_\_\_\_ Registrar \_\_\_\_\_

Acceptance                  Enrollment