



International Visiting Student Application

West Virginia University

P.O. Box 6009

Morgantown, WV 26506-6009

Phone: 304-293-2121 or 800-344-WVU1

E-mail: wvuadmissions@mail.wvu.edu

Web: <http://www.wvu.edu/>



Nonrefundable application fee (\$25.00)

Application fee will not be charged after submission of the first application

If you want to take a course at WVU for personal enrichment or to have the credit transferred to another college or university, you must complete this Application for Visiting Students.

If you are planning to have the credit transferred to another college, you will also need an official statement of good standing indicating an overall grade-point average of 2.0 or an official transcript from the last college attended.

Your application is very important to us, and for that reason we ask you to mail it as early as possible. Once we have received your complete application and verification of good standing, you will hear from us concerning your admission decision. If you have any questions, please feel free to call us at 304-293-2121, e-mail us at wvuadmissions@mail.wvu.edu, or write us at the Office of Admissions, West Virginia University, PO Box 6009, Morgantown, WV 26506-6009.

Please read instructions carefully, and type or print to speed the processing of your application.

1. Legal Name: _____
 (Last) (First) (Middle)
2. Social Security Number: _____ - _____ - _____ (For internal use only. Will be kept confidential.)
3. Date of Birth: ____/____/____
 (month/day/year)
 (eg., 1/30/1983)
4. If you previously enrolled under a different name at WVU or another college, or high school, please print all name(s) below.

5. Have you ever attended WVU before? ____ Yes ____ No If YES, for which semester/year? _____
 If YES, what was your previous major? _____
6. Current Mailing Address: _____
 (Street)

 (City) (State)

 (Zip Code)
9. Permanent (if different): _____
 (Street)

 (City) (State)

 (Zip Code)
7. Telephone: () _____ - _____
 (Area Code) Number
10. Telephone: () _____ - _____
 (Area Code) Number
8. County: _____
11. County: _____
12. Permanent E-Mail Address: _____
13. Name of person to contact in case of an emergency: _____
 (Last) (First) (Middle) (Relationship)

14. Emergency Address: _____ Telephone () _____ - _____
(if different than (Street) (Area Code) Number
above address) _____
(City) (State)

(Zip Code)

15. Please indicate semester/year for which you are applying: _____ Year _____ Fall (August – December)
_____ Spring (January – May) _____ Summer Session (May – August)

16. Gender: _____(M)ale _____(F)emale

17. Citizen Status: _____ U.S. Citizen _____ Permanent Resident with Alien Card (enclose copy of both sides of card)
_____ Refugee _____ *Non-Immigrant/Other Visa Type (specify): _____
*Non-immigrants please indicate your nation of citizenship: _____ Nation of Birth: _____

18. Ethnic Background: (Required for federal reporting) Are you Hispanic or Latino? _____ Yes _____ No
Check one or more of the following groups in which you consider yourself to be a member:
_____ American Indian or Alaska Native _____ Asian _____ Black or African American
_____ Native Hawaiian or Other Pacific Islander _____ White

19. Are you a resident of the state of West Virginia? _____ Yes _____ No
If YES, when did you begin living continuously in West Virginia? _____ / _____ / _____
month/day/year

If YES, where? _____
(if different than above) Street Address City

20. Last year, did anyone claim you as a dependent for income tax purposes? _____ Yes _____ No
If YES, who? _____
(Name) (Relationship to You)

(Street Address) (City and State) (Zip Code)

21. Are you a member of the U.S. Armed Forces or a dependent of a member? _____ Yes _____ No
If YES, is the duty station in West Virginia? _____ Yes _____ No If YES, attach documentation to prove Home of Record.

22. High School Attended: _____
(City and State)

23. Graduation Date: _____ / _____
month/ year

24. College Education: Please list all formal educational experiences (if any) since you graduated from high school.

Name of School	Location
_____	_____
_____	_____
_____	_____

I affirm that the information I have provided on this application form and all other admissions application materials is complete, accurate, and true to the best of my knowledge. Omitting or providing false information can lead to nonacceptance, the nullification of WVU credit, and/or dismissal.

Student Signature _____ Date: _____

**If this is the first time you have applied as a visiting student, have you attached your \$25.00 non-refundable fee?
Please send check or money order. Please do not send cash.**