

GENERAL INFORMATION				<i>Please print or type. Use blue or black ink. Complete all boxes (numbers 1 through 32) on both sides of application.</i>			
1. Date of birth: month day year	14. NAME: (exactly as it appears on your passport) Surname (family name) _____ First (given name) _____ Middle _____			15. Other name(s) used on school records: _____			
2. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	16. E-mail address: _____		17. Native language: _____		18. U.S. Social Security number (if you do not have one, leave blank): _____ - _____ - _____		
3. Term of admission: <input type="checkbox"/> Fall/Year _____ <input type="checkbox"/> Spring/Year _____ <input type="checkbox"/> Summer/Year _____	19. Permanent foreign address (must be a street address outside the U.S.): Valid Dates from (month/year): _____ to (month/year): _____ number / street: _____ city / district / postal code: _____ country: _____ telephone (if in US, Canada, Mexico): _____ fax (if available): _____			20. Mailing address (if different from permanent foreign address): Valid Dates from (month/year): _____ to (month/year): _____ number / street: _____ city / district / postal code: _____ country: _____ telephone (if in US, Canada, Mexico): _____ fax (if available): _____			
4. Level of study you seek: <input type="checkbox"/> New Freshman <input type="checkbox"/> Transfer (advanced standing) <input type="checkbox"/> Reentry <input type="checkbox"/> Second Degree <input type="checkbox"/> Special (nondegree)	21. Father's name and address: name (surname, first, middle): _____ number / street: _____ city / district / postal code: _____ country: _____			22. Mother's name and address: name (surname, first, middle): _____ number / street: _____ city / district / postal code: _____ country: _____			
5. Degree you seek: <input type="checkbox"/> Bachelor of Arts <input type="checkbox"/> Bachelor of Science <input type="checkbox"/> Unknown	Did he graduate from UW–Madison? <input type="checkbox"/> Yes <input type="checkbox"/> No			Did she graduate from UW–Madison? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6. Intended field of study:	23. Person to be notified in case of emergency: name (surname, first, middle): _____ relationship: _____ telephone (if in US, Canada, Mexico): _____			number / street: _____ city / district / postal code: _____ country: _____			
7. UW–Madison school or college you wish to enter:	23. Person to be notified in case of emergency: name (surname, first, middle): _____ relationship: _____ telephone (if in US, Canada, Mexico): _____			number / street: _____ city / district / postal code: _____ country: _____			
8. City and country of birth:	23. Person to be notified in case of emergency: name (surname, first, middle): _____ relationship: _____ telephone (if in US, Canada, Mexico): _____			number / street: _____ city / district / postal code: _____ country: _____			
9. Country of citizenship: <small>(as shown on passport)</small>	23. Person to be notified in case of emergency: name (surname, first, middle): _____ relationship: _____ telephone (if in US, Canada, Mexico): _____			number / street: _____ city / district / postal code: _____ country: _____			
10. Country of residency:	23. Person to be notified in case of emergency: name (surname, first, middle): _____ relationship: _____ telephone (if in US, Canada, Mexico): _____			number / street: _____ city / district / postal code: _____ country: _____			
11. If legal resident of U.S., alien registration number: _____ <small>(attach copy of both sides of resident alien card)</small>	SEND APPLICATION AND ALL DOCUMENTS TO: Office of Admissions University of Wisconsin–Madison Armory & Gymnasium 716 Langdon Street Madison, WI 53706–1481, USA APPLICATION DATES The application priority date is December 15 for the fall term and October 1 for the spring term . All international students must submit applications by December 15 or October 1 to receive full and equal consideration. Fall term applications postmarked after December 15 may not receive equal consideration and may be returned.			DO NOT WRITE IN SPACE BELOW <div style="text-align: right;"> <input type="checkbox"/> R <input type="checkbox"/> N </div> ATTACH THE APPLICATION FEE HERE.			
12. Do you hold a visa now? <input type="checkbox"/> No <input type="checkbox"/> Yes Type: _____	_____			_____			
13. Visa type you request: <input type="checkbox"/> F-1 <input type="checkbox"/> J-1 <input type="checkbox"/> None Other: _____	_____			_____			
Continue on Reverse Side							

ACADEMIC INFORMATION

24. High School or (upper) Secondary School attended:

SCHOOL: _____

CITY and STATE or COUNTRY: _____

ENTRANCE DATE (month/year): _____ GRADUATION DATE (month/year): _____

26. List **all** universities and other post-secondary institutions you have attended, previously and currently. You **MUST** list **ALL** institutions whether or not you are requesting transfer credit. *

INSTITUTION	CITY and STATE or COUNTRY	DATES	CERTIFICATE/DIPLOMA/DEGREE

* Failure to list all institutions may result in the university revoking your acceptance or terminating your enrollment.

25. Are you currently enrolled in your last year of secondary work? Yes No
If yes, list secondary courses in progress. Attach an additional page if necessary

TERM/SEMESTER	COURSE TITLE	NUMBER OF HOURS PER WEEK

27. Are you currently enrolled in post-secondary courses? Yes No
If yes, list courses now in progress and any courses you plan to take in a future term.

NAME OF COLLEGE OR UNIVERSITY: _____

TERM or SEMESTER	DEPARTMENT NAME	COURSE NUMBER	COURSE TITLE	CREDITS/UNITS or HOURS PER WEEK

28. If you did not attend school at some point since you completed secondary school, list all employment and/or activities during the time you did not attend school.

OCCUPATION/ACTIVITY	CITY and STATE or COUNTRY	FROM (month/year) – TO (month/year)

29. List all institutions you have attended, beginning with primary school and including any you may now be attending. *Use a separate line for each year of attendance.*

FROM (month/year)	TO (month/year)	AGE	YEAR IN SCHOOL	INSTITUTION	LOCATION	CERTIFICATE, DIPLOMA, or DEGREE	LANGUAGE OF INSTRUCTION
			1				
			2				
			3				
			4				
			5				
			6				
			7				
			8				
			9				
			10				
			11				
			12				
			13				
			14				
			15				
			16				

30. Write a brief statement on a separate piece of paper regarding your educational plans at UW–Madison. *Attach your statement to this application form.*

31. Check off the tests you have taken or plan to take:

- TOEFL Yes No Date taken or scheduled: _____
- SAT I Yes No Date taken or scheduled: _____
- ACT Yes No Date taken or scheduled: _____

32. APPLICANT’S DECLARATION: I certify that the information in this application and all records which accompany it are **true** and **complete**. I give permission to UW–Madison to verify my records, and I understand that inaccurate information may affect my enrollment. If I enroll at this university, I will abide by its rules and regulations.

Signature: _____ Date: _____