UNCOVERING AN ALTERNATIVE HISTORICAL NARRATIVE

UW-Parkside Application Instructions

UNIVERSITY OF WISCONSIN



This guide contains detailed steps on how to apply online to participate in the Uncovering and Historical Narrative summer program at UW-Parkside.

All students must complete this application in order to officially enroll in the program and course.

How to Get Started:

- Navigate to apply.wisconsin.edu in your web browser and click "Register as a new user" button.
 - NOTE: If you have applied to a UW institution before for a concurrent enrollment course you SHOULD use that account login information in the <u>Existing User</u> area rather than completing a new user account.
 - To recover your username and/or password, use one of the following options:
 - Use the "I can't remember my login ID and/or I can't remember my password: options
 - Call UW Help at (800)442-6459. Staff members are available to assist applicants Monday Friday from 8am 6pm





Fill out the required fields on the user registration form.

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|---|-----|-----|------|-----|-----|-----|-----|-----|------|----|-------|-----|-----|------|------|------|-----|-----|------|----|
| | | | | | | | | | | | | | | | | | | | | |

Do not use the symbols 'less than' (<), 'greater than' (>) or double dashes (-) .

| | Your login id is case sensitive. | |
|-----------------------------------|--|--------|
| Login ID * | | |
| | Passwards must contain: | |
| | * between 6 and 20 characters | |
| | * at least one uppercase letter | |
| | * at least one lowercase letter | |
| | * at least one number | |
| Password * | ••••• | |
| Confirm Password * | ••••• | |
| | Please only use an email address that you are able to maintain throughout the application process. In addition, the email address you provide cannot already be in use on this website. | |
| E-Mail Address | | |
| Re-type E-Mail Address | | |
| Secret Question * | | |
| Secret Answer * | | S N |
| First Name * | | |
| Last (Family) Name * | | 5 |
| Date of birth * Month/Day/Year | | f |
| *Required Fields | | |
| Register Cancel | | |

Record your login ID and password somewhere safe. You can use this application as your starting point in the future.

Click register when complete.

| CREATE APPLICATION CHANGE PASSWORD CAMPUS INFO | |
|---|--|
| | |
| | |
| Welcome, | |
| Thank you for registering on our site. To begin an admission application, click the 'Create a new application' link. You do not have to complete the application all at once, you can login again to continue working on and submit your application. | |
| | Click "create a |
| Unsubmitted Applications | new |
| We automatically delete unsubmitted applications when the selected term is no longer available as determined by the campus. When you create a new application, your most recent answers will be pre-filled. | application" |
| No unsubmitted applications found. Click the link to create a new application. | ШПК. |
| | |
| Submitted Applications | |
| No applications have been submitted yet. | |
| | |
| CREATE APPLICATION - INITIAL QUESTIONS | |
| High School/Secondary School/GED/HSED/Home Schooled: | Click "not yet |
| Not yet completed (no high school diploma/HSED/GED yet) | completed" |
| | • |
| Already graduated (have high school diploma/HSED/GED) | button. |
| Already graduated (have high school diploma/HSED/GED) | button. |
| Already graduated (have high school diploma/HSED/GED) Next >> | button. |
| CREATE APPLICATION - INITIAL QUESTIONS | button. |
| CREATE APPLICATION - INITIAL QUESTIONS Post-Secondary Education: | button. |
| Already graduated (have high school diploma/HSED/GED) Next >> CREATE APPLICATION - INITIAL QUESTIONS Post-Secondary Education: No college courses | button. Click the appropriate |
| Already graduated (have high school diploma/HSED/GED) Next >> CREATE APPLICATION - INITIAL QUESTIONS Post-Secondary Education: No college courses Some college courses [taken or will take before enrollment - do not include AP, IB, or CLEP courses] | button. Click the appropriate button. |



CREATE APPLICATION - INITIAL QUESTIONS UW-PARKSIDE



Please review the above information and ensure that it is correct before continuing.

Based on the above answers, you will fill out the following application:

Parkside, Special

Select "Continue" to prepare your application and proceed.



| SAVE & CLOSE START OVER PRINT SUB | Э ямт | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|
| UNDERGRAD SPECIAL STUDENT APPLICATION - | UNDERGRAD SPECIAL STUDENT APPLICATION - SUMMER 2019 | | | | | | | | |
| ✓ Valid 🗙 In | nvalid !To-do | | | | | | | | |
| CAMPUS SPECIFIC | | • | | | | | | | |
| PERSONAL INFORMATION | | • | | | | | | | |
| PERSONAL INFORMATION (CONT'D) | | • | | | | | | | |
| ADDRESS | | • | | | | | | | |
| PARENT/GUARDIAN | | • | | | | | | | |
| PARENT/GUARDIAN ADDRESS | | | | | | | | | |
| ! HIGH SCHOOL | | | | | | | | | |
| HIGH SCHOOL OF GRADUATION | | | | | | | | | |
| HIGH SCHOOL COURSES IN PROGRESS | | | | | | | | | |
| ! HIGHER EDUCATION | | | | | | | | | |
| RESIDENCY FOR TUITION DETERMINATION | | • | | | | | | | |
| RESIDENCY: APPLICANT | | • | | | | | | | |
| RESIDENCY: PARENT/GUARDIAN | | | | | | | | | |
| RESIDENCY: PARENT/GUARDIAN ADDRESS | ! RESIDENCY: PARENT/GUARDIAN ADDRESS | | | | | | | | |
| SUBMIT APPLICATION | | • | | | | | | | |

These are the sections you will be completing in your application. You can see your progress. The ! means you have information to complete. The check mark means that area is complete.

Are you currently enrolled at or have you previously attended UW-Parkside?

| | | \cap | |
|--------|-----|--------|----|
| \cup | Yes | \cup | No |

| f yes, a | IS: | |
|----------|---------------|--|
| | Undergraduate | |
| | Graduate | |

Nondegree/Special Student Attendance Date From: (mm/yyyy)

Attendance Date To: (mm/yyyy)

Date(s) unknown.

If yes, student ID number: (if known)

Applying As:

Nondegree/Special Student: High School Special

Term you plan to enter:

Summer 2019

I'm intending to take a course in the following school/college:

Social Sciences and Professional Studies (College of) 🗸

I'm intending to take the following course(s):

(include course number if known)

HIST

Add Another Course

Complete these questions as they apply to you.

Complete these two questions the way they are answered here.

| Please indicate your educational goal(s): | |
|--|--|
| Professional or personal enhancement Educational licensure Baccalaureate degree Graduate or professional school Unsure Other Taking courses while in high school If "Other," specify: | Complete the following questions as they apply to you. |
| Do you plan to teach? | |
| Yes No Clear Selection If yes, select one: - Select a value - | |
| Do you currently hold educational license(s)? | |
| Yes No Clear Selection | |
| If yes, specify state issued by, subjects and grade levels: | |
| | |
| Campus from which you expect to graduate: | |
| UW-Parkside 🗸 | |
| Did your parent(s), grandparent(s) or legal guardian(s) earn a degree | e from UW-Parkside? |
| Return to Wisconsin 0 Ves No | |
| Applicant Statement Please provide a brief statement as your purpose for applying to UW-Parkside as a a class that my current campus does not offer this semester, taking courses while in part of your application. | special student (examples could include: taking prerequisite classes for graduate school, taking n high school, taking professional development courses, etc.). This statement is an important |
| You may wish to prepare your statement in a word processor to take advantage of Note that special formatting will not be retained | spelicheck and be able to take as much time with it as you need, then copy and paste it below. |
| If you do type the statement below, be sure to save your work every 15 minutes (cli save will be lost. | ick the "Save" link below the box). If the browser session times out, any changes since the last |
| I am participating in the 現現 aummer program. | Complete the statement with "I an participating in the UAH summer program." |
| Save Always click C | heck for Errors and Continue at the |

Check for Errors and Continue

Always click Check for Errors and Continue at the end of a page.

| PERSONAL INFORMATION | • |
|---|---------------------------------------|
| Legal Name: | |
| Prefix: (optional) - Select a value - V | |
| Legal First: | Complete the following |
| Preferred First: (if different from legal first) | questions as they apply |
| Middle: | to you. |
| Last (Family): | · · |
| Suffix: (optional) - Select a value - | |
| I hereby declare that my name has changed as shown above and authorize the University | to change my records (if applicable). |
| Previous Name(s) as used on school records: | |
| Be sure to provide all previous names under which any high school or postsecondary education Previous Name 1: | nal records may exist for you. |
| Prefix: (optional) Select a value - | |
| First: | |
| Middle: | |
| Last (Family): | |
| Suffic: (optional) - Select a value - | |
| Add Another Previous Name | |
| Social Security Number (SSN) or Other Taxpayer Identification Number (TIN). SSN is p | oreferred: 0 |
| 55N: (000/30/30000) | |
| TIN: (900:00:000) | |
| Date of Birth: | |
| (mm/dd/yyyy) | |
| Gender: 0 | |
| For state and federal reporting, please provide: O Female Male | |
| Gender Identity: Woman Man Trans or Transgender A gender identity not listed here | |
| Prefer not to answer Clear Selection | |

| Race/Ethnicity: | |
|--|--|
| Please answer both a. <u>and</u> b. 🕜 | |
| Please answer both a. <u>and</u> b. ● a. Ethnicity: Are you of Hispanic or Latino/a origin? Yes No Clear Selection If yes, choose one or more from the following list: Cuban Mexican, Mexican American, or Chicano/a Puerto Rican Other Hispanic or Latino/a b. Race: Choose one or more from the following list: African American or Black American Indian or Alaska Native Native Hawaiian/Pacific Islander Cambodian Hmong Laotian Vietnamese Other Asian White U.S. Citizenship Status: | Complete the following questions as they apply to you. |
| U.S. Citizen Check for Errors and Continue PERSONAL INFORMATION (CONT'D) | |
| Have you and/or a parent or spouse served in the U.S. Military? | |
| theck all that apply) Self Parent/Spouse Neither | |
| Birth Place | |
| ity: | |
| Check for Errors and Continue | |

| Applicant's Personal Email Address: |
|---|
| Preferred: 😧 (example: name@emailprovider.com) |
| Permanent Home Address: |
| Since: (mm/yyyy) |
| Address: |
| |
| City: |
| County (if Wisconsin): - Select a value - |
| U.S. State: - Select a value - |
| Canadian Province: - Select a value - |
| Other State/Province: |
| Zip/Postal Code: (valid zip or postal code) |
| Country: - Select a value - V |
| - or - specify (if not listed): |
| |
| Confirm Address |
| Permanent Home Phone Number: |
| U.S., Canada, or Caribbean: (999-999-9999) |
| Other Countries: Country Code, City Code, Local Number: |
| Permanent Home Fax Number: |
| U.S., Canada, or Caribbean: (999-999-9999) |
| Other Countries: Country Code, City Code, Local Number: |
| Mailing Address: |
| Same as above: Ves No |
| If different from permanent home address, enter mailing address on next page. |
| Business/Alternate Phone Number: |
| U.S., Canada, or Caribbean: (999-999-9999) |
| Other Countries: Country Code, City Code, Local Number: |
| Check for Errors and Continue |

Complete the following questions as they apply to you.

| Parent/Guardian 1: | |
|--|--|
| Relationship: - Select a value - V - or - specify (if not listed): Is he/she living? Ves No Unknown Clear Selection | Complete the following questions as they apply to you. |
| Parent/Guardian 1 - Name: | |
| Prefix: (optional) - Select a value - First: Middle Initial: Last (Family): | |
| Suffix: (optional) | High School of Graduation or Its Equivalent: |
| Parent/Guardian 1 - Address: Address Same as Applicant: Yes No Clear Selection | Select one: High School Academic program taught in a home setting GED/HS Equivalency Diploma Other |
| Address Unknown | Are you currently enrolled in high school? |
| If different from applicant address and known, enter address on next page. | O Yes O No |
| High School: | |
| Add/Edit | |
| Date of High School Graduation: | |
| (mm/yyyy) Check for Errors and Continue | |

| If you are currently attending high school, list courses you will complete. | courses to be completed this year. Include a | nd identify any Advanced Placen | nent (AP) or Intern | ational Baccalaureate (IB) |
|--|--|---------------------------------------|---------------------|----------------------------|
| | | | | |
| Return to Application Cogour | | | C | Complete the following |
| Add Course | | | | |
| Subject/Course Title | | | C | uestions as they apply |
| Semester/Term | | | | |
| - Select a value - | - Select a value - | | τ | o you. |
| | | | | |
| Number of Credits: | Dual Enrollment: () | R or PLTW course) | | |
| record partial credits as decimals, e.g. 2.5 | (bo not check this, in this an Ar | , IB OF PETW COURSE.) | | |
| Save Clear | | | | |
| Your Courses | | | | |
| Course# Subject/Course | Title Se | mester/Term | Year | Credits Dual |
| | | | | Enrollment |
| | | | | |
| | | | | This is whore your |
| | | | | This is where your |
| | | | | courses will show up. |
| | | | | |
| | | | | |
| | | | | |
| RESIDENCY: APPLICANI | | | | • |
| I have lived continuously and only in Wi | sconsin since: | | | |
| (mm/yyyy) | | | | |
| | | | | |
| l am listed as a dependent on U.S. incom | ne tax forms of: | | | |
| O Father | | | | |
| Mother | | | | |
| Father and Mother | | | | |
| O Spouse | | | | |
| Other (specify) | | | | |
| Claim my own exemption | | In LL C. Annual | | |
| Not Applicable (I do not file U.S. taxes and | i am not claimed as a dependent on anyone | rs U.S. taxes) | | |
| - or - specify (if not listed): | | | | |
| | | | | |
| Claim my own exemption since: (tax year) | | | | |
| Check for Errors and Continue | | | | |
| | | | | |
| UNDERGRAD SPECIAL STUDENT APPLICATION - SUMMER 20 | 19 | | | |
| Valid X Invalid | ! To-do | | | |
| ✓ CAMPUS SPECIFIC | | • | | |
| ✓ PERSONAL INFORMATION | | • | | This is what your |
| PERSONAL INFORMATION (CONT'D) | | • | | |
| ✓ ADDRESS | | • | | completed application |
| ✓ PARENT/GUARDIAN | | • | | ccroop chould look like |
| ✓ PARENT/GUARDIAN ADDRESS | | • | | Screen should look like. |
| | | • | | Notice all sections have |
| HIGH SCHOOL OF GRADUATION | | • | | |
| | | • | | the green check mark. |
| | | • | | Click Submit |
| | | • | | |
| ✓ RESIDENCY: PARENT/GUAPDIAN | | | | |
| ✓ RESIDENCY: PARENT/GUARDIAN ADDRESS | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | |
| | | | | |

| AFFLICATION SUBMISSION | | |
|---|--|---|
| Progress Indicator: | | Click Dorform Final |
| Check for Errors Sign and Submit Application Submit Payment | | Check for Frrors |
| Please click the "Perform Final Check for Errors" button to run a final and complete ch | eck for errors on your application. | |
| Perform Final Check for Errors Return to Application Cancel | | |
| APPLICATION SUBMISSION | | |
| Progress Indicator: | | |
| Check for Errors Sign and Submit Application Subm | nit Payment | |
| Congratulations! No errors were found on your application. | | |
| You need to electronically "sign" the application. First, we need your name errors. Finally, if a Social Security Number (SSN) or other Taxpayer Identi | ne. Next, we need your birthdate. These ification Number (TIN) was collected, we | e will be compared to the data in the application to help eliminate e'll ask you to verify that data as well. |
| First Name: | Entervo | ur information and click |
| Last Name: | "Cian on | |
| Birth Date (mm/dd/yyyy): | Sign an | a submit the |
| Social Security Number (SSN): | applicati | on" |
| By clicking the "Sign and submit the application" button, I certify that the inaccurate information may affect my enrollment, tuition or financial aid including my permanent home address. I also understand that if I have a released to other agencies that may also be considering me for assistant other pertinent information to the University of Wisconsin System. I furth Taxpayer Identification Number (TIN) and date of birth to any UW Institu documents become the property of the University of Wisconsin System. <i>Note: Once your application has been submitted, you will not be also</i> | information I have provided is true and Istatus. I agree to notify the admissions applied for financial assistance, informa- ce. Further, I authorize my secondary so her authorize the University of Wiscons Ition. If I enroll at this university, I will al ble to modify the data again. | d complete to the best of my knowledge and I understand that s office, in writing, if there is a change to any of the information, ation concerning the amount of financial aid I may be offered may be chool to release a transcript of my secondary school record and any in System to release my Social Security Number (SSN) or other bide by its rules and regulations. This application and supporting |
| Sign and submit the application Return to Application Ca | ancel | |
| APPLICATION PAYMENT | | |
| Progress Indicator: | | |
| Check for Errors Sign and Submit Application Submit | Payment | |
| Your application has been submitted to the institution you have selected. I for it. If the email does not arrive within the next few hours, please check y that in the future, emails from us are automatically permitted. | lf you provided an email address, an en your spam or junk mail folder. You may | nail is being automatically generated and sent to you. Please watch y also consider adding eapp@uwex.edu to your address book so |
| Important Note: The confirmation/followup email is being currently block | ed by some email providers. If you hav | e not received an expected email, please contact us via phone. |
| Your application submission confirmation number is: 04700678 | | |
| Please print this page or record this number for your records. | This is the final | screen. There is no |
| No payment is needed for this application. | application fee. Print this page for your | |
| Continue | records if you w | vish and click continue. |

CONGRATULATIONS, YOU HAVE COMPLETED YOUR APPLICATION FOR THE UAH SUMMER PROGRAM.