

## Application for Admission to the Educator Professional Development Program For Off Campus Courses

SECTION 1 GENERAL INFORM	ATION								
Legal Name: Last (Family)	First:	First:		Middle:	Previous Name (s) as used on records:				
Social Security Number:	Date of Birth (	e of Birth (mo/da/yr):			City, State & Country of Birth:				
E-Mail Address:		Phone Number:	C	Cell Number:		Fax:	Fax:		
Street:	City:		S	State:		Zip/Postal	Code:		
Are you a U.S. Citizen? Yes No If no, indicate Country of Citizenship:				Racial/Ethnic Heritage: (Check one box)					
If no, check one:	·		African American/Black						
Refugee/Granted Political Asylum (Attach			American Indian or Alaska Native. Tribal						
Resident Alien: (Attach a copy of both sid	card)		affiliation:  ☐ Southeast Asian: Cambodian, Hmong,						
Applied for: Give Nice Type (e.g., 144)			Laotian, Vietnamese			ng,			
☐ Visa Holder: Give Visa Type (e.g., H4): ☐ Requesting Student Visa:F1J1NoneUnknown				Other Asian/Pacific Islander					
Requesting Student visa:F1	OHKHOWH		☐ Hispanio		ianuei				
Have you served on active duty in the U.S. Arm			_ ·	on-Hispanic					
│ Yes │ No					vish to provide	<b>.</b>			
Semester you plan to enter:	Are you curre	ntly enrolled at or have	you previo				arkside?		
_	☐ Ye	s ☐ No If yes,	when:						
☐ Fall ☐ Spring ☐ Sui	mmer If yes, as	Undergraduate [		uate 🔲 No	ndegree/Spec	cial Student			
You are currently applying as a:	•								
☐ Undergraduate Nondegree-\$175 per cr		ate Nondegree-\$280 p			Noncredit A				
SECTION II COURSE REGISTRA	<b>TION</b> (Must be c	ompleted to officiall	y be regis	stered for cr	edit courses	s)			
courses in the same term MUST be taker Registrar's Office at the University of WI-I Course Title		n contact the Regist	rar's Offic	ce by calling	(262) 595-2		•		
Course Tille		# of Credits Gradi		_etter Grade		PDEV	USE ONL	<u>- Y</u>	
		Credi		etter Grade		PDEV			
		Credi		etter Grade		PDEV			
SECTION III RESIDENCY INFOR	MATION FOR						L applica	ants)	
Are you a legal Wisconsin resident and/or do yo							Yes	□ No	
Have you or your spouse recently moved to Wis							Yes		
I have lived continuously and only in Wisconsin	since: (mo/vr)	Do you hold a valid V	Visconsin o	driver's license	e?		Yes	□ No	
Have you registered a motor vehicle(s) in Wisco	Have you filed a Wisconsin state income (not property) tax return as a resident of WI?						_		
☐ Yes Since: (mo/yr)	☐ No		ears?	1	□ No				
SECTION IV APPLICANT SIGNA	TURE To be v	alid, application m	nust be s	igned and	dated.				
l certify that the information in this applica may affect my enrollment, tuition or finand the amount of financial aid I may be offer this University, I will abide by its rules and University of Wisconsin Parkside or to off application and supporting documents be	cial aid status. I a ed may be release d regulations. I a icially withdraw fo	lso understand that ed to other agencies agree to pay the fee rm classes by filing	if I have that may tuition fo the appro	applied for f y also be co r classes as opriate form	inancial ass nsidering me signed to me	istance, info e for assista e upon rece Registrar's C	rmation conce. If I exipt of bill f	oncerning enroll at rom the	
Applicant's Signature:						Date:			
SECTION VI TEACHER PREPAR	ATION & PROF	ESSIONAL DEV	ELOPM	ENT CON	TACT INFO	ORMATIO	N		
Applications can be returned to our office	by: MAIL -	Marisella Malacar	a		FAX -	262-595	-2265		
		University of Wisc	onsin-Pa	rkside					
		900 Wood Rd., PC	D Box 200	00	EMAIL -	malacarm@uwp.edu			
		Kenosha, WI 531	41-2000						
Please contact Marisella	Malacara at (262	) 595-2753 or mala	carm@uv	vp.edu with	anv questio	ns or conce	rns.		
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