



Instructions: (Please complete the entire application)

Or at: www.engr.wisc.edu/services/oeo

UNIVERSITY OF WISCONSIN-MADISON ENGINEERING OUTREACH OFFICE

PROGRAM COORDINATOR

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A. Program Information

Term (Fall / Spring / Summer):
Course Name:

Classification: EORS 9
Credits: 3

Call Number:

Course Number:



B. General Information

Office Use Only

Res

Non-Res

Full name (last)

(first)

(middle initial)

Birthdate (M/D/Y)

Social Security #

Citizen information

U.S. citizen Non-U.S. citizen (country):

Type of visa:

Permanent immigrant

Since (M/Y)

Mailing address (street/city/state/zip+4)

E-Mail:

Work Phone:

Fax:

Gender: Female Male

Are you a veteran? Yes No

Racial/ethnic heritage (check one)

African American

Asian American/Pacific Islander (check one)

—Cambodian, Laotian, Vietnamese admitted to U.S. after 12/31/75

—Other Asian American/Pacific Islander

American Indian or Alaskan Native

Tribe _____

Hispanic/Latino

White, NonHispanic

Full name of last college/university

city/state

date last attended (M/Y)

Have you ever attended UW-Madison? Yes No

If yes, month and year last attended:

Name change since last enrolled at UW-Madison:

From (last)

(first)

(middle initial)

Degrees earned

BA/BS _____ MA/MS _____ PhD _____ Other _____

C. Residence and Employment Information

Are you a Wisconsin resident and/or do you claim legal Wisconsin residence for tuition purposes?

Yes If yes, complete the following: No If no, sign at the bottom of this form.

List all employment and/or activities in the last two years (be specific)

employment/activity

city/state

From (M/D/Y)

To (M/D/Y)

Voting: Where and when did you last vote or register to vote: state

(M/Y)

Driver's License: State in which you hold a valid driver's license:

Date obtained: (M/Y)

Have you filed a Wisconsin (not Federal) income tax return as a resident? Yes If yes, what years?

No

Dependent for federal taxes of: Self Joint with spouse Father Mother Other

High School: Did or will you graduate from a Wisconsin high school or receive a GED in Wisconsin? Yes No

If yes, month & year of graduation, or when GED was obtained:

Parental Info: Complete if you have a parent residing in WI, or if your last surviving parent resided in WI. [see Section (c) of Wisc. Stats. 36.27(2)]

Name of parent: _____ City/state of residence _____

Since (M/Y): _____

Has parent filed a WI State income tax return as a resident for the past 2 years? Yes No

US Citizen? Yes No

D. Signature: To be valid, application must be signed and dated

I certify this information is true and complete; I understand that incorrect/incomplete information may affect admissibility/eligibility to continue.

Signature:

Date: