

**UNIVERSITY OF WISCONSIN-PLATTEVILLE  
DISTANCE LEARNING APPLICATION FOR GRADUATE ADMISSION**

**DISTANCE LEARNING CENTER**

B12 Karrmann Library  
University of Wisconsin-Platteville  
1 University Plaza  
Platteville WI 53818-3099

**If you prefer, you may apply online using the *University of Wisconsin System Electronic Application for Graduate Admission* that can be accessed from our web site: <http://www.uwplatt.edu/~disted>**

**Note: A \$45.00 processing fee must accompany the application for admission.**

Instructions: Complete all the information requested. Return the application form, along with the \$45.00 fee, to the above address. An official transcript from the institution granting the bachelor's degree must be sent directly from the institution to the above address. If you are requesting transfer credits, you must also arrange for official transcript(s) from the institution(s) where the credits were earned. It is not necessary to supply a transcript of work taken at UW-Platteville. Please answer **all** questions. Failure to complete information may result in a delay in processing your application for admission.

**Semester Expect to enter:** (circle one) Fall Spring Summer 20\_\_\_\_\_

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**I. GENERAL INFORMATION: Social Security Number \_\_\_\_\_ Last Name \_\_\_\_\_**

\_\_\_\_\_ **First Name** \_\_\_\_\_ **MI** \_\_\_\_\_ **Maiden** \_\_\_\_\_

**Permanent Address:** Number and Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_ Zip+4 \_\_\_\_\_ County \_\_\_\_\_

**Mailing Address:** Number and Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_ Zip+4 \_\_\_\_\_ County \_\_\_\_\_

**Telephone:** Home \_\_\_\_\_ Work \_\_\_\_\_ E-

mail \_\_\_\_\_

If you have lived at a different address during the past 12 months, please list last address:

Number and Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_ Zip+4 \_\_\_\_\_ County \_\_\_\_\_

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**II. INTENDED AREA OF GRADUATE STUDY: (check only one)**

(09011) **Master of Engineering**  (05150)

**Master of Science in Project Management** (21051) **Master of Science in Criminal**

**Justice**

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**III. EDUCATIONAL DATA:**

**A. UNDERGRADUATE:**

1. List the type of undergraduate degree you received (example B.S.): \_\_\_\_\_ Month and year of graduation: \_\_\_\_\_

List undergraduate major(s): \_\_\_\_\_ List undergraduate

minor(s): \_\_\_\_\_

2. List **ALL** college/university institutions attended on the **undergraduate** level:

Name: \_\_\_\_\_ City/State: \_\_\_\_\_  
\_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

Name: \_\_\_\_\_ City/State: \_\_\_\_\_  
\_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

Name: \_\_\_\_\_ City/State: \_\_\_\_\_  
\_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

Name: \_\_\_\_\_ City/State: \_\_\_\_\_  
\_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

Name: \_\_\_\_\_ City/State: \_\_\_\_\_  
\_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

3. List your most recent two years of employment, if any:

Name of Employer \_\_\_\_\_ Type of Work \_\_\_\_\_  
\_\_\_\_\_ City/State \_\_\_\_\_ Dates \_\_\_\_\_

Name of Employer \_\_\_\_\_ Type of Work \_\_\_\_\_  
\_\_\_\_\_ City/State \_\_\_\_\_ Dates \_\_\_\_\_

Name of Employer \_\_\_\_\_ Type of Work \_\_\_\_\_  
\_\_\_\_\_ City/State \_\_\_\_\_ Dates \_\_\_\_\_

**B. GRADUATE:**

1. Do you plan to complete the master's degree at Platteville?  Yes  No

2. Have you applied previously for admission to graduate study at another institution?  Yes  No

If "yes", name the institution: \_\_\_\_\_ Action taken on your application:  Accepted  Rejected

3. Do you hold an earned master's degree?  Yes  No

4. List **ALL** institutions attended on the graduate level:

Name: \_\_\_\_\_ City/State: \_\_\_\_\_  
\_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

Name: \_\_\_\_\_ City/State: \_\_\_\_\_  
\_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

Name: \_\_\_\_\_ City/State: \_\_\_\_\_  
\_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

Name: \_\_\_\_\_ City/State: \_\_\_\_\_  
\_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

Name: \_\_\_\_\_ City/State: \_\_\_\_\_  
\_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

**IV. DEMOGRAPHIC INFORMATION:**

**Birth Date (mmddyy):** \_\_\_\_\_ **Sex:**  Male  Female **Veteran?**  Yes  No

If "yes", are you receiving benefits?  Yes  No

**Marital Status:**  (S) Single  (M) Married  (D) Divorced  (W) Widowed

**Race:**  (W) White  (B) Black  (S) Hispanic  (I) Amer. Indian/Alaskan Native  (A) Asian/Pacific Islander  (V) Southeast Asian  (O) Other  
**Citizenship:**  (C) U.S.A.  (P) Resident Alien \*  (A) Non-Immigrant Alien, indicate country of citizenship \_\_\_\_\_ and give Visa Type (example F1): \_\_\_\_\_  
\*Resident Alien--Give Alien Registration No. \_\_\_\_\_ and attach a notarized copy of both sides of the resident alien card.

**V. RESIDENCY INFORMATION:**

Residency:  (R) Wisconsin  (N) Other Birth Place (City/State): \_\_\_\_\_

High School Graduated From: \_\_\_\_\_

City/State: \_\_\_\_\_ Year of

Graduation: 19 \_\_\_\_\_

How long have you lived in Wisconsin? \_\_\_\_\_ years. Are you claiming Wisconsin residency for tuition purposes?  Yes  No

Did you file a Wisconsin State Income Tax form for the full previous year?  Yes  No

Do your parent(s) live in Wisconsin?  Yes  No Name of Parents: Father \_\_\_\_\_

Mother \_\_\_\_\_

If "yes", please indicate address and name of city: \_\_\_\_\_

If "yes", please indicate how long they have lived at the above address: from

\_\_\_\_\_ 19 \_\_\_\_ to \_\_\_\_\_ 19 \_\_\_\_

If deceased, are parent(s) buried in Wisconsin?  Yes  No

Are you currently employed as a teacher?  Yes  No If "yes", name of school in which you are currently employed: \_\_\_\_\_

Date you signed teaching contract for employment at current position: \_\_\_\_\_

If not teaching, please indicate place of current employment: \_\_\_\_\_

**Residency Examiner's Use:** Wisc. resident:  Yes  No Residency Examiner's Signature \_\_\_\_\_  
Date \_\_\_\_\_

I certify that the above information is true and correct:

Signature of Student \_\_\_\_\_

Date \_\_\_\_\_