

Non-Traditional Student Admission Application

i am applying

Full-time SWAU Employee or dependent

Personal Information	(Please fully complete this form)				
US Social Security Number		l			
LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX (JR.	, 111)	
HOME STREET ADDRESS			CELL PHONE (REQUIRED)		
СІТҮ	STATE/PROVINCE	ZIP/POSTAL CODE	COUNTRY	COUNTRY	
IF YOU WORK AT SWAU, PLEASE LI	ST THE DEPARTMENT				
EMAIL ADDRESS					
DATE OF BIRTH (MM/DD/YYYY)	GENDER (M/F)	RELIGIOUS AFFILIATION			
Have you attended Southwes	stern before:	on Southwestern record	S:		
Your response is voluntary a	nd will be used in a nondiscriminatory man	nner, consistent with ap	plicable civil rights lav	vs. (US Students only)	
	Non-Hispanic Race : □ White □ Black		-	-	
I wish to take the following c	course(s): (Must Complete all sections)				
Course ID (i.e. HIST 125)	ie ID (i.e. HIST 125) Course Title Fall Semester Spring Sc		Spring Semester	Campus/Online	
(10110111111111111111111111111111111111	Course Hale	Tun gemester	opinig demester	campus, crimic	
Check all that are applicable	for the above courses:				
Course type: \square For college	credit □ Not for credit □ Audit				
	s are given in this program; therefore, no permanent recons must be at least 25 years old and not seeking a degr		w these steps:		
a baccalaureate degree. Available courses: courses with a regular enrollment of at least six students. The			otain required signatures		
Tuition and fees for special courses and seminars are listed in the bulletin (finances section). I hereby certify that the information I have given in this application is true and correct to the best of			Submit application to Records Pay applicable tuition at the Cashier's window		
my knowledge, knowing that withholding or misrepresenting information may result in cancellation of my registration. By my signature, I pledge to uphold the ideals and standards as stated in the student handbook.			Show receipt to Records to activate Portal Take receipt to Student Financial Services for clearance		
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SIGNATURE OF APPLICANT			DATE		
SIGNATURE OF SUPERVISOR (IF EN	IPLOYED AT SWAU)		DATE		
VERIFICATION OF EMPLOYMENT—	HUMAN RESOURCES SIGNATURE (IF APPLICABLE)		DATE		