



**UNIVERSITY OF WASHINGTON**  
**RETURNING STUDENT APPLICATION**  
 REGISTRATION OFFICE  
 206-543-8580

**NOTICE:** This form can only be used by former students returning to the University of Washington in the **same** classification or those changing to nonmatriculated status. Applications to Graduate Nonmatriculated or Postbaccalaureate status are available in the Graduate and Undergraduate Admissions Offices.

● **\$60 CHECK OR MONEY ORDER MUST ACCOMPANY THIS APPLICATION.**  
 The application fee is nonrefundable and must be submitted each time you apply.

Return application and fee to:  
 UNIVERSITY OF WASHINGTON, **REGISTRATION OFFICE**  
 Rm. 225, Schmitz Hall, 1410 N.E. Campus Parkway, Box 355850  
 Seattle, Washington 98195-5850

Social Security Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (Required by Taxpayer Relief Act of 1997)	Release of Student Directory Information <b>NOTE:</b> If "No" is checked, no information will be released to ANYONE. <input type="checkbox"/> Yes <input type="checkbox"/> No	To ensure consideration, completed applications must be post-marked by the following closing dates. Check box to indicate appropriate quarter and write in the year for which you are applying. PLEASE NOTE: If you apply for a quarter and then do not attend, you will need to fill out a new application for the quarter that you do plan to attend. <input type="checkbox"/> 1 Summer Quarter, June 1 <input type="checkbox"/> 2 Autumn Quarter, July 1 <input type="checkbox"/> 3 Winter Quarter, November 1 <input type="checkbox"/> 4 Spring Quarter, February 1 Year Returning _____
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Name (Last) _____ (First) _____ (Middle) _____	(Former Name) _____	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Birthdate (Mo., Dy., Yr.) _____
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Local Address (Street and Number) _____ (City) _____ (State) _____ (ZIP) _____	Non-UW Email Address _____
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Permanent Mailing Address (Street and Number) _____ (City) _____ (State) _____ (ZIP) _____	Local Phone _____ - _____ - _____	Day Phone _____ - _____ - _____
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Are you a resident of Washington? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, From _____ To _____	U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, what nation? _____
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What type of Visa? <input type="checkbox"/> Student <input type="checkbox"/> Immigrant <input type="checkbox"/> Visitor <input type="checkbox"/> Other	Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No
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UW Staff/Faculty attending on tuition exemption? <input type="checkbox"/> Yes <input type="checkbox"/> No	State tuition exemption <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, give department and Box Number _____
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All fee-based programs, including Evening Degree, are not available for tuition exemption benefits.

Evening Degree <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, specify major _____	When did you first enter the University of Washington? _____	When were you last registered at the University of Washington? Give (Mo., Yr.) _____
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Which classification applies to you? <input type="checkbox"/> First Bachelor's Degree <input type="checkbox"/> Summer only Nonmatriculated <input type="checkbox"/> Course work as a Nonmatriculated staff or state student (space available only)	<input type="checkbox"/> Post baccalaureate (5th year) <input type="checkbox"/> Professional Program (Dental, Medical, Law, Pharmacy)	Former Major Area of Study _____
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**Note:** Do you plan to change to a new major? To change majors, you must apply and be accepted through the department application process.  Yes  No

**Statistical Information (Optional)** What race do you consider yourself? (check all that apply).

<input type="checkbox"/> Asian Indian (600) <input type="checkbox"/> Chinese (605) <input type="checkbox"/> Filipino (608) <input type="checkbox"/> Japanese (611) <input type="checkbox"/> Korean (612)	<input type="checkbox"/> Vietnamese (619) <input type="checkbox"/> Other Asian _____ <i>Specify one group. Example: Cambodian, Laotian, Thai, etc.</i>	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Guamanian (660) <input type="checkbox"/> Native Hawaiian (653) <input type="checkbox"/> Samoan (655)	<input type="checkbox"/> Black/African American (870) <input type="checkbox"/> American Indian/Alaska Native: Specify tribal/corporate affiliation below and submit documentation. _____ <input type="checkbox"/> White/Caucasian (including Middle Eastern) (800) <input type="checkbox"/> Other: (specify) _____
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Below, list schools attended since last attendance at the University of Washington and send 2 official transcripts to the Office of Undergraduate Admissions, Box 355852, to transfer credits.	(Optional) Are you of Hispanic / Latino Origin? (Check all that apply) <input type="checkbox"/> No (999) <input type="checkbox"/> Yes, Mexican / Mexican American / Chicano (722) <input type="checkbox"/> Yes, Puerto Rican (727) <input type="checkbox"/> Yes, Other Hispanic / Latino _____ <i>Specify one group. Example: Argentinean, Columbian, Cuban, Nicaraguan, Salvadoran, Spaniard, etc.</i>
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<b>Returning Evening Degree?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>OFFICE USE ONLY</b> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">Appl. Type</td> <td style="width:15%;">Qtr.</td> <td style="width:15%;">Year</td> <td style="width:15%;">Campus</td> </tr> <tr> <td style="width:15%;">Appl. Status</td> <td style="width:15%;">Class</td> <td style="width:15%;">Grad. Status</td> <td style="width:15%;">Appl. Fee</td> </tr> <tr> <td style="width:15%;">NCR:</td> <td style="width:15%;">Res</td> <td style="width:15%;">Vet</td> <td style="width:15%;">Evening</td> </tr> <tr> <td style="width:15%;">Sp</td> <td colspan="3"></td> </tr> </table>	Appl. Type	Qtr.	Year	Campus	Appl. Status	Class	Grad. Status	Appl. Fee	NCR:	Res	Vet	Evening	Sp			
Appl. Type	Qtr.	Year	Campus														
Appl. Status	Class	Grad. Status	Appl. Fee														
NCR:	Res	Vet	Evening														
Sp																	
<b>Change to Evening Degree?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No																	
<b>Special Selections Major?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No																	
<b>Holds?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	Major _____ College Department Abbrev. Path Level/Type																
<b>Immunization Hold?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	Major _____ College Department Abbrev. Path Level/Type																
<b>Gone more than 2 years?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	Major _____ College Department Abbrev. Path Level/Type																
<b>Academic Drop?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	Last School _____ Staff _____ Home Address Code _____																
<b>Degree earned?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	Type _____ Mo _____ Yr _____																
<b>Other</b>	Ethnic _____ Hispanic _____ Mail Code _____ Mail Code _____ Mail Code _____																

School or College	Location (City, State)	From (Mo., Yr.)	To (Mo., Yr.)	Diploma or Degree	Date Received

Failure to provide complete and accurate information on this form may result in denial of admission or dismissal from the University of Washington.

<b>(Full Legal Signature required)</b> _____	<b>(Date Application Completed)</b> _____
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