



EDGEWOOD COLLEGE UNDERGRADUATE

APPLICATION

1000 Edgewood College Drive • Madison, WI 53711-1997 • (608) 663-2294 • (800) 444-4861 • admissions@edgewood.edu

- \$25.00 application fee is non-refundable. Please make check or money order payable to Edgewood College.
- All applicants must meet posted admissions deadlines. For details please visit: www.edgewood.edu/students/deadlines.htm.
- You can also apply on-line at www.edgewood.edu.

PERSONAL INFORMATION

Last Name _____ First Name _____ MI _____

All Previous Last/Maiden Names _____ Preferred Names _____

Address _____ City _____

State _____ Zip _____ County _____ Country (If not United States) _____

E-mail _____

Home Phone _____ Cell Phone _____

Employer (If applicable) _____ Work Phone _____

Preferred method of contact Home phone Cell phone Work phone Email

ACADEMIC INFORMATION

Semester of Interest: (Please check box and indicate year) Fall Spring Summer Year _____

I would like to register for: Full-Time (12 or more credits) Part-Time

I will enter Edgewood College as:

a Degree Seeking Freshman

b Degree Seeking Transfer (specify type below):

Undergraduate (First Degree)

Post-Baccalaureate (Second Degree)

c Not Degree Seeking (specify type below):

Post-Baccalaureate Teacher Certification

Post-Baccalaureate adding Major/Minor to existing degree

Non-Degree

Limited Status (two course maximum)

Youth Options, 50/50

Collaborative Program

Major _____ or Deciding Minor (if applicable) _____

Are you interested in living on campus? Yes No

Are you applying for Financial Aid? Yes No (US veterans eligible for benefits, please contact the Registrar's Office for information.)

High school of graduation _____ City _____ State _____

Graduation Month _____ Year _____ Will you be graduating early? Yes No

Guidance Counselor Name _____ Phone _____

Please list ALL previous/current colleges, universities, vocational/technical schools that you have attended. Attach a separate sheet if necessary. Failure to report all previous institutions attended may result in dismissal from the College.

Name of School	City/State	Dates of Attendance	Degree	Credits Earned/GPA

Are you currently eligible to return to these institutions? Yes No (If no, please attach explanation.)

Are you currently enrolled in college courses? Yes No

Have you previously attended Edgewood College? If yes, call 608-663-2294 to complete a re-entry form. Yes No

Did you or are you planning to complete Advanced Placement, CLEP, or International Baccalaureate exams? Yes No
If yes, please submit official scores.

BIOGRAPHICAL INFORMATION

Date of Birth _____ / _____ / _____ Social Security Number _____
SSN's are kept confidential and are required for billing. They are not used as student ID numbers.

Place of Birth _____ First Language _____

Religion _____ Choose not to respond Gender _____

Ethnicity: African American/Black American Indian/Alaska Native Asian/Pacific Islander Caucasian/White Hispanic/Latino

Bi/Multi-Racial (please specify): _____ Other (please specify): _____ Choose not to respond
Edgewood College does not discriminate against applicants on the basis of race, color, age, sex, religion, handicap, sexual orientation, or national or ethnic origin.

Are you a United States citizen? Yes No If no, are you or have you applied to be a Permanent Resident of the US? Yes No

If you are neither a US citizen nor a permanent resident, please complete the following: Country of citizenship _____

Current US visa type/Seeking US visa type _____ Language of high school or college instruction _____

FAMILY INFORMATION

Parents/Legal Guardians/Spouse

Name _____ Name _____

Relationship _____ Relationship _____

Address _____ Address _____

City/State/Zip _____ City/State/Zip _____

Phone _____ Phone _____

Email _____ Email _____

ADDITIONAL INFORMATION

Please list any clubs or varsity sports you plan to participate in at Edgewood College:

To what other colleges are you applying? _____

How did you find out about Edgewood College? _____

CHECKLIST: Please indicate that you have requested or sent the necessary documents for admission.

All transcripts must arrive in a sealed envelope from the issuing institution. Opened transcripts will not be accepted.
An essay and/or letters of recommendation may be required for admission upon request.

FRESHMAN

- Signed Application Official High School Transcript or GED
- Official ACT/SAT Scores \$25 Application Fee

NON-DEGREE

- Signed Application Official Transcript (send most recent)
- \$25 Application Fee

TRANSFER AND POST-BACCALAUREATE 2ND DEGREE

- Signed Application Official High School Transcript or GED
- Transcripts from each college attended \$25 Application Fee

LIMITED STATUS

- Signed Application \$25 Application Fee

POST-BACCALAUREATE (ADDING CERTIFICATION/MAJOR/MINOR)

- Signed Application Transcripts from each college attended
- \$25 Application Fee

YOUTH OPTIONS / 50/50

- Signed Application Transcript Counselor Permission Form
- \$25 Application Fee

I certify that the information in this application is complete and accurate to the best of my knowledge. I realize that providing false or inaccurate information may lead to action, including dismissal from the College.

Signature _____ Date _____

As provided by the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act of 1998, you are entitled to request and receive a copy of the Edgewood College Annual Security Report. This report includes crime statistics and institutional policies concerning campus security. You may access the report at www.edgewood.edu/parentsfamily/safetySecurity/. For a paper copy, visit Predolin 215.

OFFICE USE ONLY

Printed July, 2007 Source of Application _____ Date of Application _____
Fee Paid _____ ID # _____ Date of Withdrawal _____