



ADMISSION UPDATE FORM

High School Dual Enrollment

Complete and return to
Undergraduate Admissions
Western Illinois University
1 University Circle
Macomb, IL 61455
Fax: 309-298-3111

Please print or type the requested information below to guarantee consideration for admission to the University upon completion of courses through the high school dual enrollment program. Please send an updated official high school transcript after the conclusion of your junior year and again at the conclusion of your senior year.

WIU ID Number _____

Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip Code _____

Application Information

High School Graduation Date (Month & Year) _____

I am applying for future consideration as a:

Freshman Transfer Transfer Admission Guarantee (TAG)

and starting in:

August (Fall) January (Spring) June (Summer) Year _____

I would like to attend the:

Macomb Campus Quad Cities Campus Online Only

My intended major is _____

- I understand that this application must be signed and dated before action can be taken. I understand that withholding information requested on this application or giving false information may make me ineligible for admission to the University or subject to dismissal. I certify that the information provided on this application is correct and complete.

Applicant's Signature

Date

For questions about the High School Dual Enrollment program, please contact Undergraduate Admissions at 309-298-3157 or admissions@wiu.edu.