



**Western Illinois  
University**

# 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](mailto:admissions@wiu.edu).*