



Office of Undergraduate Admissions

COURSES IN PROGRESS

STUDENT INFORMATION

First Name: _____ Last Name: _____
 Date of Birth: _____ Student ID: _____
 Email Address: _____
 Home Address: _____
 Current School: _____
 Graduation Year: _____

Course Name	# Credits	Term		
<i>Algebra II (EXAMPLE)</i>	<i>0.50</i>	<input type="checkbox"/> Fall	<input checked="" type="checkbox"/> Spring	<input type="checkbox"/> Full Academic Year
		<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Full Academic Year
		<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Full Academic Year
		<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Full Academic Year
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		<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Full Academic Year
		<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Full Academic Year
		<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Full Academic Year

Completed forms should be emailed or mailed to the Office of Undergraduate Admissions
undergraduateadmissions@uwm.edu / 414.229.2222 (phone)
 Mailing Address: P.O. Box 749, Milwaukee, WI 53201-0749