UNIVERSITY OF WASHINGTON
BOTHELL

# RETURNING STUDENT APPLICATION

**Notice:** This form can only be used by former UW Bothell students who have not enrolled for at least two consecutive quarters (not counting Summer Quarter) and are returning to the University of Washington Bothell in the **same** classification, or by those changing to nonmatriculated status. A check or money order in the amount of $50 must accompany this application. Please return application and fee to: **University of Washington Bothell, Campus Box 358500, 18115 Campus Way NE, Bothell, WA 98011-8246.** Please call (425) 352-5300 for assistance or questions.

1. For which term are you applying? (Check one quarter and write the year in below)
   Year [ ] ❑ Autumn ❑ Winter ❑ Spring ❑ Summer

2. Classification: ❑ First bachelor's degree ❑ Second bachelor's degree ❑ Nonmatriculated (non-degree) student

3. Social Security Number _____ - _____ - _____ 4. UW Student Number _____

5. Name _____
   Last First Middle

6. Former Name _____
   Last First Middle

7. Gender ❑ Female ❑ Male 8. Birthdate _____/_____/_____

9. Mailing Address _____
   Street and number City State Zip

10. Home phone ( ) _____ - _____ 11. Work phone ( ) _____ - _____

11b. Email address _____

12. U.S. Veteran? ❑ Yes ❑ No

12a. Would you like the Office of Veterans Services to inform you about veterans benefits at UWB? ❑ Yes ❑ No

13. Resident of Washington? ❑ Yes ❑ No ***If yes***, length of residence from _____/_____ to _____/_____

14. U.S. Citizen? ❑ Yes ❑ No ***If no***, what country? _____ Visa type _____

15. UW or state employee? ❑ Yes ❑ No Attending under a tuition exemption program? ❑ Yes ❑ No

16. Date of first attendance at UW Bothell _____/_____ (month/year) 17. Date of latest attendance at UW Bothell _____/_____ (month/year)

18. List schools attended since last attendance at UW Bothell and send official transcripts for transfer credit.

| School | Location | Dates Attended | Diploma/degree received | Date Awarded |
|---|---|---|---|---|
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Failure to provide complete and accurate information on this form may result in denial of admission or dismissal from the University of Washington.

*X* _____ _____

***Full Legal Signature*** ***Date***