

# Visiting Student Application

Visiting students are non-matriculated students. Visiting students attend another college or university and want to earn credit at Virginia Wesleyan University that will transfer back to their home institution. Admission as a visiting student does not imply admission to a degree program at Virginia Wesleyan University.



VIRGINIA  
WESLEYAN  
UNIVERSITY

Semester for which you are applying:  Fall 20\_\_  Spring 20\_\_  Summer 20\_\_  Winter 20\_\_

Please print or type.

Ms.  Mrs.  Miss  Mr.

Email: \_\_\_\_\_

Name: \_\_\_\_\_  
*Last First Middle (Maiden / or other)*

Summer Address: \_\_\_\_\_  
*Street Apt. #*

\_\_\_\_\_ *City State Zip Phone*

Permanent Address (if different): \_\_\_\_\_  
*Street Apt. #*

\_\_\_\_\_ *City State Zip Phone*

Date of Birth: \_\_\_\_\_ Gender: M/F Are you a Military Veteran?  Yes  No

**Optional:** Are you of Hispanic or Latino origin: Yes / No

What is your race? Select one or more of the following:  American Indian or Alaskan Native  Asian  
 Black or African American  White  
 Native Hawaiian or Pacific Islander

The following three questions are required by federal law. If you answer "yes" to any of them, please attach a letter of explanation addressing in detail the nature of the incident, when it occurred, and its resolution.

- Have you ever been convicted of a crime, other than a minor traffic violation, for which the charges have not been expunged or pardoned?  Yes  No
- Have you ever been academically dismissed from or declared ineligible to attend any previous institution?  Yes  No
- Has disciplinary action been initiated or taken against you at any of the institutions you previously attended?  Yes  No

In Case of Emergency, Please Call \_\_\_\_\_ Phone: \_\_\_\_\_

If not a U.S. citizen: Country of Citizenship \_\_\_\_\_ Type of Visa \_\_\_\_\_  
*If a permanent resident of the United States, please submit a copy of both sides of your Green Card.*

Have You Previously Attended Classes At Virginia Wesleyan University?  Yes, Dates \_\_\_\_\_  No

If you wish to have a transcript of your course work at Virginia Wesleyan University sent to another college or university, please list the complete mailing address below. There is no fee for transcripts.

School: \_\_\_\_\_ Department \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip \_\_\_\_\_

I understand the conditions of this application as a visiting student and certify I have provided accurate information. If not, I understand that cancellation of my class registration may result.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

**Send this application to:**  
Virginia Wesleyan University  
Center for Enrollment Services  
5817 Wesleyan Drive  
Virginia Beach, VA 23455

Email: enrollment@vwu.edu || Fax: 757.461.5238

Rev. 05/17



## Visiting Student – Permission from Home Institution

Please print or type.

[ ]Ms. [ ]Mrs. [ ]Miss [ ]Mr.

Name: \_\_\_\_\_  
*Last First Middle (Maiden / or other)*

An official at the institution you are presently attending must sign this form confirming you have permission to attend Virginia Wesleyan University as a visiting student. With their signature, the sending official attests the applicant has completed the prerequisites for the course(s) to be taken at VWU.

This student is in good standing at \_\_\_\_\_ (college/university name)  
and has permission to enroll in the course(s) indicated below.

Course Department	Number	Section
<Sample> English	105	01

Sending official name (please print): \_\_\_\_\_ Title: \_\_\_\_\_

Sending official signature: \_\_\_\_\_ Work phone number: \_\_\_\_\_