

WAYNE STATE UNIVERSITY

Return to:
Graduate Admissions
Welcome Ctr, 4th floor
Wayne State University
Detroit, MI 48202
(313) 577-3577

Graduate Permit to Register Application

A non-refundable application fee of \$50.00 is required. Attach check or money order made payable to Wayne State University. NO CASH.

Admission as a Permit to Register student does not carry with it permission to register as a degree applicant. Individuals requiring a student visa cannot be enrolled on a Permit to Register basis.
This admission is valid for one semester only.

Name: Last		First	Middle	Former Name (if applicable)	
Social Security Number		Birthdate Month ____ Day ____ Year ____		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Permanent Address		City	State	ZIP	
E-Mail Address			Phone Number Home (____) _____ Work (____) _____		
Race: (Check ONE box only.) Note: Even if you are multi-racial, please answer this question by indicating either the race you identify with most or the race with which you are usually associated in the community.					
A. <input type="checkbox"/> Hispanic		D. <input type="checkbox"/> White (non-Hispanic)			
B. <input type="checkbox"/> Asian or Pacific Islander (API)		E. <input type="checkbox"/> Black			
C. <input type="checkbox"/> American Indian, Eskimo or Aleut (AIEA)					
Are you Multiracial? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>For purposes of this question, you are multi-racial if you have parents from more than one of the broad race categories listed above, or if your parents regard themselves as being multi-racial.</i>					
Country of citizenship	Country of birth	State of legal residence	How long have you lived there?	County of residence	
Permanent Residents should include a photocopy of both sides of the Permanent Resident Card with this application. Naturalized U.S. citizens should provide a copy of the U.S. passport or other proof of citizenship. Visa holders should include a copy of their visa and I-94.					
<input type="checkbox"/> I have an immigrant visa. Current status: _____ Issue date: _____ Expiration date: _____					
A# _____ <input type="checkbox"/> I currently have a _____ visa. Issue date: _____ Expiration date: _____					
Which tests have you taken? <input type="checkbox"/> TOEFL date: _____ <input type="checkbox"/> TWE date: _____ <input type="checkbox"/> MELAB date: _____					
Select the college in which you want to take classes. (check only one)					
<input type="checkbox"/> Business Administration		<input type="checkbox"/> Graduate School -		<input type="checkbox"/> Medicine	
<input type="checkbox"/> Education		Library Science only		<input type="checkbox"/> Nursing	
<input type="checkbox"/> Engineering		<input type="checkbox"/> Law		<input type="checkbox"/> Pharmacy and Health Sciences	
<input type="checkbox"/> Fine, Performing and Communication Arts		<input type="checkbox"/> Liberal Arts and Sciences		<input type="checkbox"/> Social Work	
Indicate when you wish to start at Wayne State University.					
<input type="checkbox"/> Fall 20 _____		<input type="checkbox"/> Winter 20 _____		<input type="checkbox"/> Spring/Summer 20 _____	
Previous Education Record:					
Name of institution	Dates of attendance		Degree	Office use only	
_____	_____		_____	_____	
_____	_____		_____	_____	
_____	_____		_____	_____	

Have you ever applied for admission to Wayne State University? _____ When? _____

Have you registered for credit courses (including off-campus) at Wayne State? _____ When _____

Date of last attendance at Wayne _____

I certify that the information given is complete and accurate. If admitted, I agree to comply with the regulations of WSU.

Signature _____ Date _____

NOTE: A graduate Permit to Register will be issued to an applicant only if:

The college/department is not able to process a regular application in time for the start of the requested semester, OR

The applicant is not currently eligible for a regular admission to the requested program or regular non-degree status, OR

The applicant has no intention of pursuing a degree program, but would like to take a class for personal enrichment.

College/Departmental Approval

Our college/department cannot process a regular application for this applicant in time for the start of the semester. I have _____ have not _____ verified proof of degree, and I recommend that a Permit to Register be issued to this graduate student in the _____ program.

Signature _____ Date _____

Title _____ College or Department _____

International applicants MUST present a satisfactory TOEFL score.

THIS BOX MUST BE SIGNED BY APPLICANT

I understand that my admission as a Permit to Register student is valid for one semester only. Future registrations will require the submission of another application. I also understand that under this status I am NOT eligible for financial aid.

Signature

Date

Print First and Last Name

Graduate Admissions Action

Permit Approved

Permit Not Approved