

STUDENT RECORD FORM

_____	_____	_____
Last Name	First Name	Middle Name
_____	_____	_____
Street Address	City, State	Zip Code
_____	_____	_____
Home Phone	Work Phone	Cell Phone
_____	_____	_____
E-Mail Address		

REQUIRED Admission Information

_____	_____	_____
First Semester Ever Attended at WSU	WSU College Name (i.e.: Engineering/Law School)	Major
CIRCLE:	<i>1 2 3 4</i>	<i>UG G PB JD PhD</i>
	Year of Study	Student Status

VETERANS [CHAPTER 30, 31, 32, 34]

_____	_____	
Social Security Number	Claim Number (<i>If different from SSN</i>)	
_____	_____	
Branch of Service	Service Exit Date	Delimiting Date (<i>10ys From Exit Date</i>)

RESERVISTS / NATIONAL GUARD [CHAPTER 1606]

_____	_____
Social Security Number	Date of Eligibility
_____	_____
Branch of Service	Delimiting Date (<i>10ys From Eligibility Date</i>)

DEPENDENTS / SURVIVORS [CHAPTER 35]

_____	_____
Student's Social Security Number	Claim Number-----Payee Number
_____	_____
Date of 26 th Birthday (Child)	Spouse Delimiting Date
_____	_____
Veteran's Social Security Number	Veteran's Branch of Service