

**Application for the Western Regional Graduate Program
Western Interstate Commission for Higher Education (WICHE)**

Submit this form to the Office of Graduate Studies, 600 Unitus Bldg.

Name _____ Student ID # _____
last first middle

Present Address _____
street city state zip

Permanent Address _____
street city state zip

Day Phone _____ E-mail _____

Date of Birth _____ Place of Birth _____
month / day / year city state/province

Length of residence in your present state From _____ To _____ State _____
month / day / year month / day / year

Country of Citizenship _____ If not USA, type of Visa or other status _____

Do you hold permanent or temporary resident immigration status? Yes No

Do you hold Refugee or Political Asylum status? Yes No

If you answered **YES** to either of the above, you must attach a copy of both sides of your Resident Alien Card or Form I-94 or other documentation.

I am applying for the following program:

- | | |
|--|---|
| MA/MS Ed:Special Education (Visually Impaired) | MURP, Master of Urban and Regional Planning |
| MS, Environmental Science | MUS, Master of Urban Studies |
| MEM, Master of Environmental Management | PhD, Urban Studies |
| PhD, Environmental Sciences and Resources: | PhD, Public Administration and Policy |
- Circle emphasis, if applicable: Biology, Chemistry, Civil Engineering, Economics, Geology, Geography, Physics

Intended term of admission _____

Have you ever attended PSU previously? Yes No

Have you ever before received tuition benefits from a Western Exchange Program? Yes No

If yes, College or University _____ Term _____ Year _____

Have you paid non-resident tuition at PSU during the past year? Yes No

If yes, what terms? _____

List all colleges and universities attended, including your present institution

School (most recent first)	State	From (mo/yr)	To (mo/yr)

I understand that I am eligible for WICHE-related in-state tuition provided I am a resident of a participating state*, admitted to a participating program, and remain in good academic standing. (*AK, AZ, CO, HI, ID, MT, NV, NM, ND, SD, UT, WA, WY)

Signature _____ Date _____

OGS Use Only

Received	Adm Gpa	cr/total	Decision	Comments
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