Instructions: High school students who will not graduate as of June of this year must be accepted to the University of Mary Washington Summer Session before registering for classes. Complete and submit this form along with an official high school transcript and a letter of support from the principal or high school guidance counselor. Students will be notified of their acceptance in time to register for classes.

MAIL TO: Office of the Registrar **Summer Session University of Mary Washington** 1301 College Avenue Fredericksburg, VA 22401-5300 University of Mary Washington

HIGH SCHOOL STUDENT SUMMER SESSION APPLICATION

YEAR _____

NAME_______last first middle

_____SSN _____

CURRENT MAILING ADDRESS _____

HONOR PLEDGE:

Your registration as a student at the University of Mary Washington is not complete without your signature affixed to the Honor Pledge below. The Honor Pledge applies to every student enrolled at the University. Every student is required to sign the Honor Pledge as part of the application process.

I, as a student at the University of Mary Washington, do hereby accept the Honor System. I have read the Honor Constitution, understand it, and agree to abide by its provisions. Accordingly, I resolve to refrain from giving or receiving academic material in a manner not authorized by the instructor, from illegally appropriating the property of others, and from deliberately falsifying facts. I acknowledge that, in support of the Honor System, it is my responsibility to report any violations of the Honor Code of which I am aware, and that it is my duty to participate as an honor trial juror if called upon to serve, unless officially excused. I realize that, in the event of a violation of the Honor Code, a plea of ignorance will not be ac-ceptable, and that such a violation could result in my permanent dismissal from the University. I further pledge that I shall endeavor at all times to create a spirit of honor, both by upholding the Honor System myself and helping others to do so.

Student Signature

Academic and Financial Arrangements Agreement:

I understand that this registration is subject to all terms and conditions, financial and otherwise, set forth in the current Academic Catalog and other official documents. Further, I accept all terms and conditions, financial and otherwise, which are in effect during the entire period of my enrollment at the University. I agree that, in the event of default of payment in any form, I am responsible for penalties as published by the University and for all reasonable administrative costs, collection fees, or attorney's fees incurred in the collection of whatever funds are due.

Student Signature Date

Parent/Guardian Signature Date

Note: If the applicant is not 18 years of age, both the applicant and the parent or guardian must sign this application.

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DAYTIME PHONE		

DATE OF BIRTH (mo/day/yr) PLACE OF BIRTH SEX D M D F

DEMOGRAPHIC INFORMATION:

Note: This information in the demographic section is optional. Answers to these questions will not be used in a discriminatory manner. Your cooperation is appreciated.

Are you Hispanic/Latino? U Yes, Hispanic or Latino (including Spain) U No

Regardless of your answer to the prior questions, please select one or more of the following ethnicities that best describe you:

American Indian or Alaska Native (including all Original Peoples of the Americas)

Asian (including Indian subcontinent and Phillippines)

Black or African American (including Africa and Caribbean)

Native Hawaiian or Other Pacific Islander (Original Peoples)

U White (including Middle Eastern)

CITIZENSHIP: Country of Citizenship

If not a United States citizen, please indicate
Permanent Resident
VISA Holder

If VISA holder, indicate type

STUDENT STATUS INFORMATION:

Have you attended the University of Mary Washington before this summer term? \Box Yes \Box No

If yes, please provide dates you attended the University.

What high school are you attending?_____

What courses (course number and title) do you wish to enroll in during the summer term?

Please provide the name/address of a parent/guardian to whom all tuition & fee bills & grade reports shall be mailed.

Name:_____ Phone:_____

Address:

Form R113