**APPLICATION FOR ADMISSION**

SOUTHWESTERN OKLAHOMA STATE UNIVERSITY

DEPARTMENT OF EDUCATION

Full Name      \_ Date      \_

Student ID #      \_Social Security #      \_

Permanent Address      \_

Weatherford Address      \_

Phone Number      \_

Classification: [ ]  freshman [ ]  sophomore [ ]  junior [ ]  senior [ ]  graduate

 If graduate, date admitted to Graduate School:      \_

Major field or fields      \_

Advisor:      \_

Do you have a degree? [ ]  yes [ ]  no

If so, what type is it? [ ]  AA [ ]  BS [ ]  BA [ ]  Masters

Where did you obtain your degree?      \_

If you are a transfer student, name the institution from which you are transferring:      \_

SWOSU Department of Education

Attn: Mr. Ed Klein, Chair

100 Campus Drive

Weatherford, OK 73096