



**Women, Policy and Political Leadership (WPPL)  
 Certificate Program**  
 NON-DEGREE APPLICATION

**Student Information:**

\_\_\_\_\_  
 Last Name, First Name, Middle Name

\_\_\_\_\_  
 Preferred Name

\_\_\_\_\_  
 AU Student ID#

or

\_\_\_\_\_  
 Social Security Number (If you do not have an AU ID#)

\_\_\_\_\_  
 Date of Birth

Sex:  Male  Female

Resident Status:  US Citizen  Non US Citizen  Permanent Resident

Visa Type (Circle one): F1 J1 B1 B2 G4 H1 A1 A2 Citizenship: \_\_\_\_\_

Biographic Information (Optional): As an equal opportunity/affirmative action institution, AU asks that you identify yourself according to these ethnic groups. Please check all that apply:

- Black/African American  Native American (Indian/Eskimo)  Caucasian American  
 Hispanic American  Asian/Pacific Islander American  Non US Citizen

**Contact Information:**

**Permanent Address:**

\_\_\_\_\_  
 Street (and Apartment Number)

\_\_\_\_\_  
 City

\_\_\_\_\_  
 State

\_\_\_\_\_  
 Zip Code

**Current Address**

\_\_\_\_\_  
 Street (and Apartment Number)

\_\_\_\_\_  
 City

\_\_\_\_\_  
 State

\_\_\_\_\_  
 Zip Code

\_\_\_\_\_  
 E-mail Address

\_\_\_\_\_  
 Alternate E-mail Address

\_\_\_\_\_  
 Cell Phone Number

\_\_\_\_\_  
 Daytime Phone Number

\_\_\_\_\_  
 Evening Phone Number

How did you hear about the WPPL Certificate program? \_\_\_\_\_

\_\_\_\_\_



**WOMEN & POLITICS INSTITUTE**  
**SCHOOL of PUBLIC AFFAIRS**

**Educational Background:**

Do you plan to apply to a degree program at American University?  Yes  No

If yes, when \_\_\_\_\_ Program \_\_\_\_\_

Have you been denied admission or been dismissed by American University?  Yes  No

If yes, when \_\_\_\_\_ Program \_\_\_\_\_

Have you been suspended or dismissed from another college (US or international)?  Yes  No

If yes, when? \_\_\_\_\_

If you have been dismissed from any college including American University, please explain: \_

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Below, please list all previous colleges and/or universities attended, your dates of attendance, and the degree you received there.

College/University Attended	Dates of Attendance	Degree
	Month/Year	
	Month/Year	
	Month/Year	
	Month/Year	

I understand that I assume academic and financial responsibility for each course for which I register and that course withdrawal and cancellation of charges are governed by the policies printed in the Schedule of Classes. I certify that the information provided is complete to the best of my knowledge. I realize that falsification of my academic background is sufficient reason for dismissal

\_\_\_\_\_  
 Signature and Date

Please send completed application, resume, most recent transcript, and a one-page personal statement, two letters of recommendation and a \$55.00 application fee:

**Women & Politics Institute: American University \* 4400 Massachusetts Ave NW, WARD 237 \* Washington, DC  
 20016-8130 \* TEL: 202-885-2903 \* FAX: 202-885-2967**