



**Women, Policy and Political Leadership (WPPL)
Undergraduate Certificate Program**
ENROLLMENT FORM

Student Information:

Last Name, First Name, Middle Name

Preferred Name

AU ID #

Date of Birth

Sex:

Male

Female

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

How did you hear about the WPPL Certificate program? _____

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

Educational Background:

Degree/Major at American University: _____

Expected Graduation Date: _____
Month/Year

Current GPA: _____

Signature

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 enrollment form, transcript, and resume: