

**STUDENT INFORMATION:**

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Last name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_

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

UW-L ID # \_\_\_\_\_

**ALUMNI INFORMATION:**

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Please identify parent, grandparent or legal guardian that is a UW-La Crosse graduate.

Check relationship to UW-L graduate:

- Biological mother      Biological father      Stepmother      Stepfather      Legal guardian  
Biological grandmother      Biological grandfather

Last name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

(Graduates name as used on college records, if different than above)

Last name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_

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

Year of graduation from UW-La Crosse (if known) \_\_\_\_\_

Signature of eligible alumnus attesting to relationship: (if living) \_\_\_\_\_

**Return to:** Admissions  
UW- La Crosse  
1725 State St.  
La Crosse, WI 54601

I certify that the information in this application is true and complete to the best of my knowledge and I understand that inaccurate information may affect my tuition or financial aid status.

Applicants signature: \_\_\_\_\_ Date \_\_\_\_\_