

**Admissions at 703-993-4622** 

## **Enrollment History**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

G Number:	Phone:					
Enrollment History:						
Please list all colleges and universilist all institutions previously attended from schools not listed below we official transcripts of all previous versions.	ded may res	ult in cancel onsidered f	lation of a	dmission ar	nd registra ou are res	ation. <b>Course work</b> sponsible for having
Name of Postsecondary Institution (Specify branch or campus)	State (or Country)	Dates Attended		Credit Hours		Degree Earned
		From (Mo./Yr.)	To (Mo./Yr.)	Attempted	Earned	(if applicable)
Current Enrollment:  Please list the courses in which you Course Number and Title	u are curren	tly enrolled	or those y	ou intend to	o complet	te before enrolling. Credits
I certify that all information	given on t	his applica	ation is c	omplete,	true and	d correct.
Signature: Date					e:	
Completed forms can be emailed to ugtrans@gmu.edu or faxed to the Office of						