☐ WSU Tri-Cities
☐ WSU Vancouver
☐ EDP

WASHINGTON STATE UNIVERSITY
PROMISE FORM

PLEASE PRINT:

Name _____ WSU ID# _____
Last First Middle

Official transcript(s) must be forwarded to the WSU Office of Admissions by the institutions listed below:

_____

_____

_____

To remain enrolled, I understand that I must have the above listed transcript(s) sent directly to the Office of Admissions at WSU and that the transcript(s) must be received by the Office of Admissions no later than:

_____
Month/Day/Year

I understand that I am fully responsible for insuring and verifying (call or come into the Office of Admissions) that the required transcript(s) is received by the date indicated above. I further understand that I may be **DISENROLLED** from the current term _____ at Washington State University if the transcript(s) does not arrive by this date **OR** if an evaluation of my total academic record indicates I am ineligible for admission to WSU. **TRANSFER STUDENTS MUST HAVE A MINIMUM OF A 2.00 GRADE POINT AVERAGE (2.50 FOR INTERNATIONAL STUDENTS) IN ALL TRANSFERABLE WORK.**

_____ _____
Student's Signature Date

_____ _____
Local Street Address Phone

_____ _____
City, State, Zip Work Phone

_____
Authorized by (signature)

Remarks: _____

_____

_____

/ White copy - Pullman Office of Admissions / Yellow copy - Student / Pink copy - Branch Campus Admissions