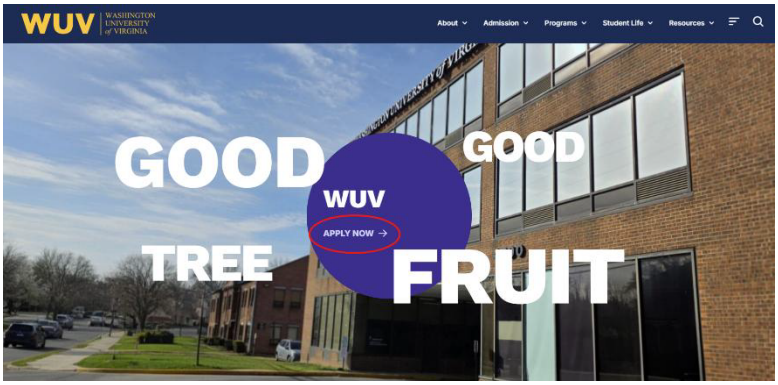
WASHINGTON UNIVERSITY *of* VIRGINIA

"Good Tree Good Fruit"

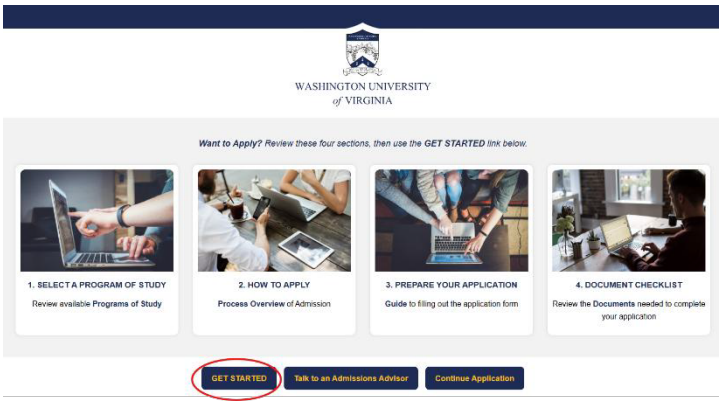
4300 Evergreen Lane Annandale, VA 22003
T. 703.333.5904 F. 703.333.5906
www.wuv.edu info@wuv.edu

How to Complete the Application Form

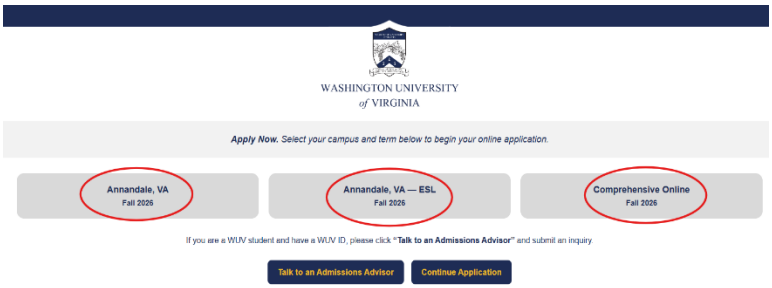
Want to Apply? Please select the "**Apply Now**" option.



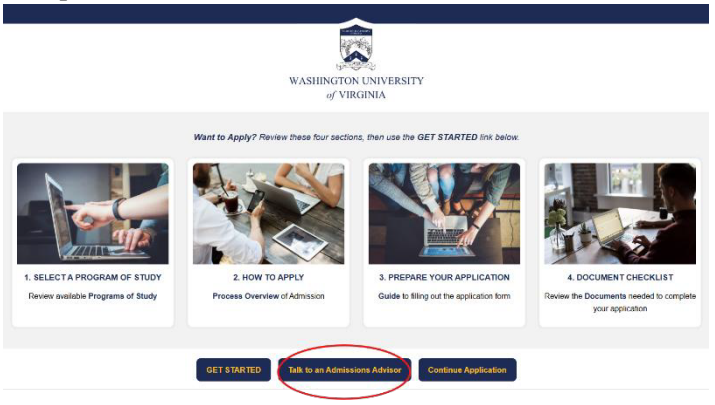
If you would like to start your application right away, please select "**Get Started**"



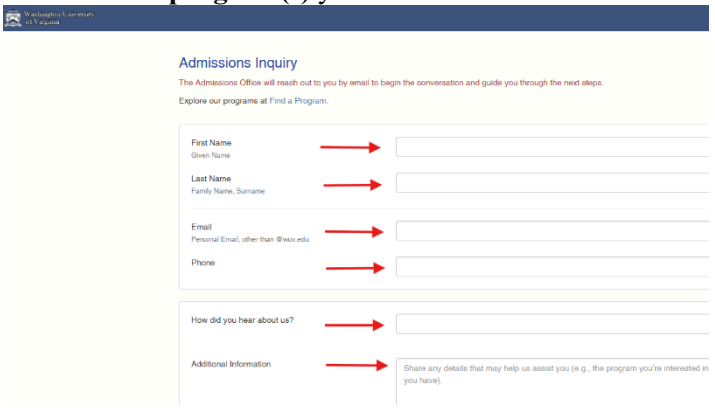
STEP 1: Please select your **campus** and **term** to begin your application.



If you haven't decided which program to apply for yet, please select "**Talk to an Admissions Advisor**"



STEP 1: Please submit an **inquiry** and let us know which **program(s)** you're interested in.



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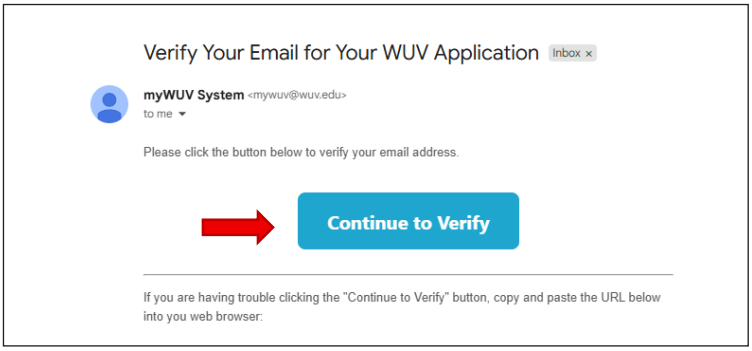
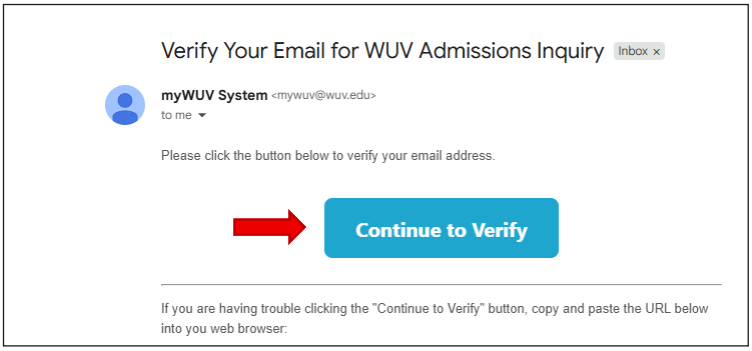
STEP 2: Check your email inbox or spam folder and verify your email address.

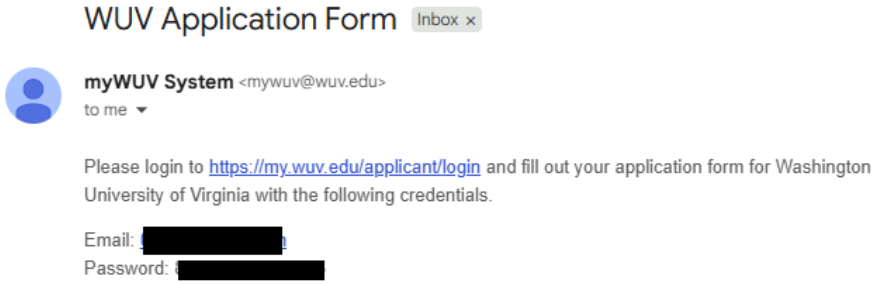




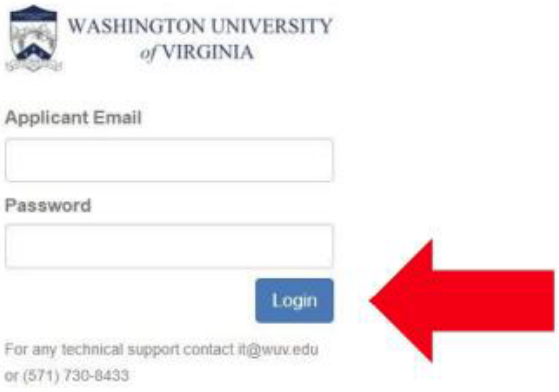
STEP 3:

- ☒ If you requested an **Application,** you'll receive your application portal credentials to begin.
- ☒ If you submitted an **Inquiry**, an admissions advisor will contact you within 1-2 business days.

NOTE: We cannot send the application form without your email verification.



STEP 4 : Go to **https://my.wuv.edu/applicant/login** to access your application using your email and temporary password provided.



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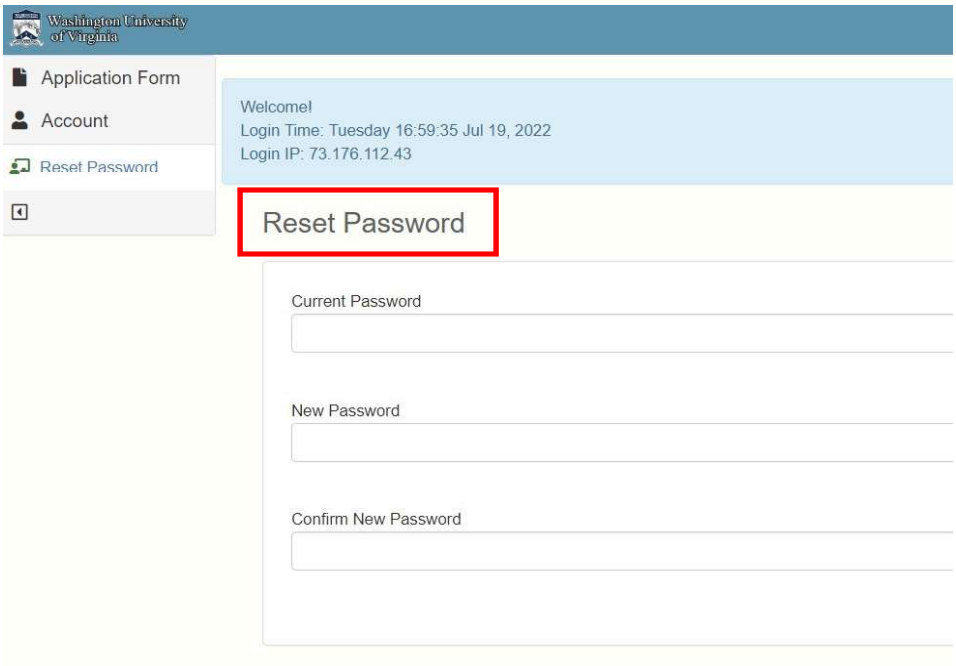
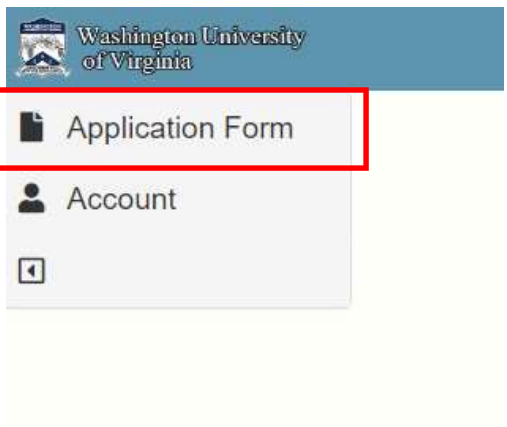
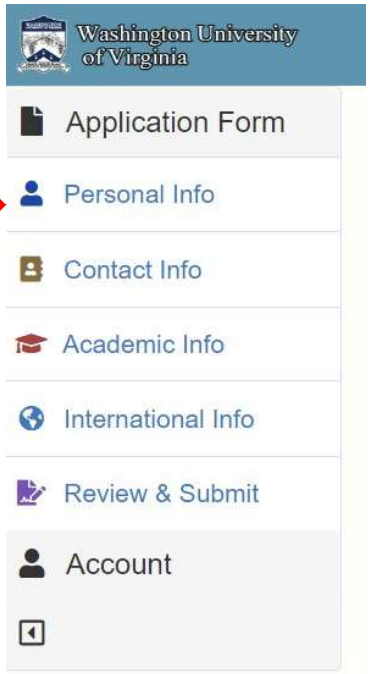
STEP 5: **Reset** your password



STEP 6: Click **"Application Form"** from the menu on the left





STEP 7: Click **Personal Info**

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STEP 8: Fill in your **personal information** as instructed below

Personal Information



Upload Your Photo
Passport-size
No selfies

Clear, **color** photo
Taken in **last 3 months**
No background
No selfies

First Name
Your **LEGAL** First Name / Given Name (**Do not use all caps**)

Last Name
Your **LEGAL** Last Name / Surname (**Do not use all caps**)

Gender
Select your gender **as shown on passport**

Date of Birth
Your date of birth **as shown on passport** : mm/dd/yyyy

Country of Birth
Select Country of Birth **as shown on passport**

City of Birth
Your City of Birth **as shown on passport**

Race
Select your race

Select one

Are you a US citizen?
- Yes, I'm a US citizen.
- No, I'm not a US citizen.

Social Security Number
Provide your SSN if assigned one: XXX-XX-XXXX

Next

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STEP 9: Fill in your **contact information** as instructed below

Contact Information

Email & Phone Numbers

Email

Your verified email address

Phone

10-digit **valid US phone number**. *If overseas student*, provide your phone number **with country code**

Emergency Contact

Phone number of your **emergency contact**

Information of Emergency Contact; **Limit 30 characters**

Relation, Name, etc.

Current Address

Street Provide your **CURRENT physical address** in English

City

State

Zip

Country

Mailing Address

Same as Current Address

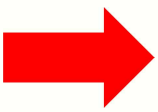
Street Provide your **MAILING address** *IF DIFFERENT* from the current address

City

State If they are identical, click the blue button above

Zip

Country



Next

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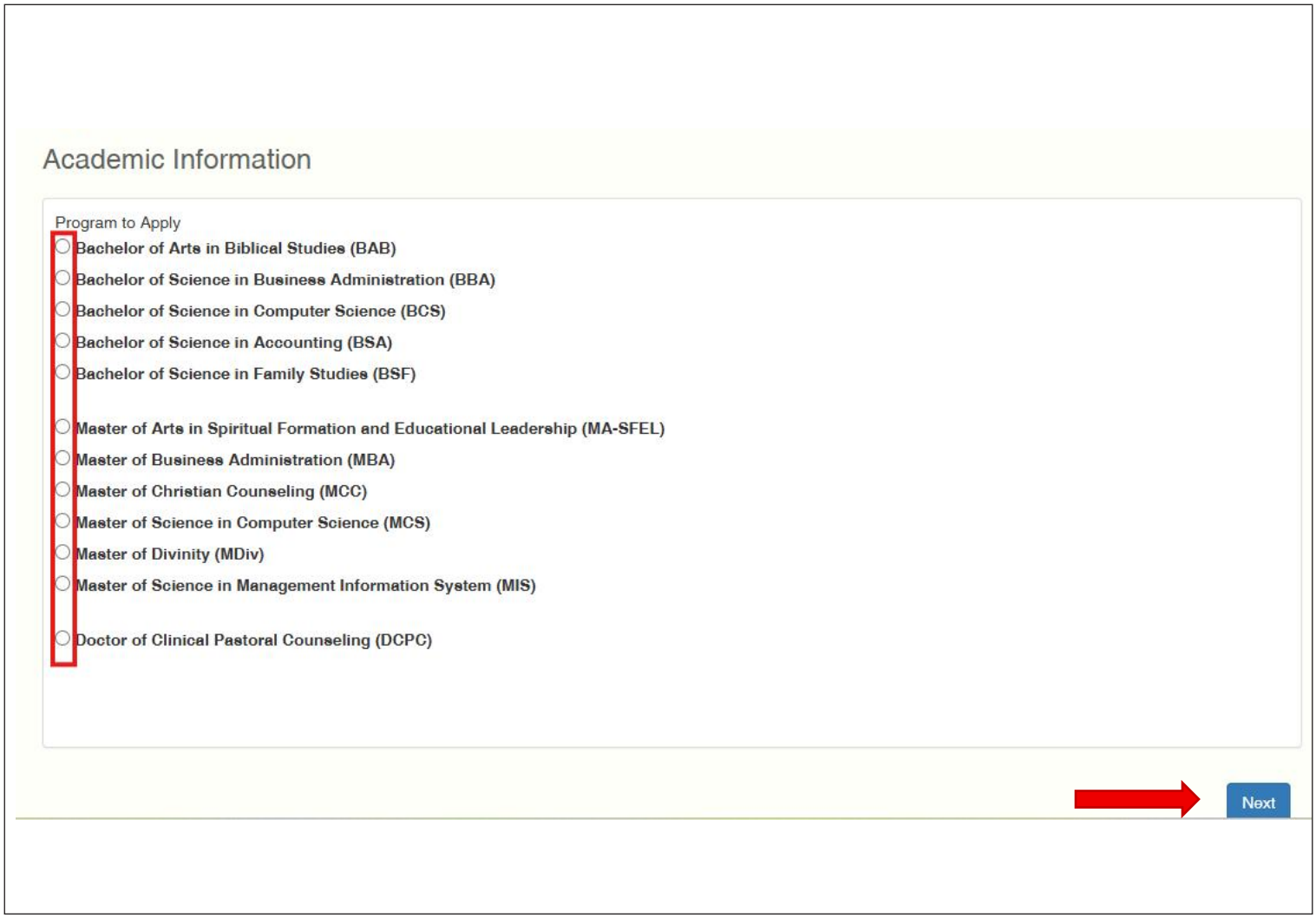
STEP 10: Fill in your **academic information** as instructed below.



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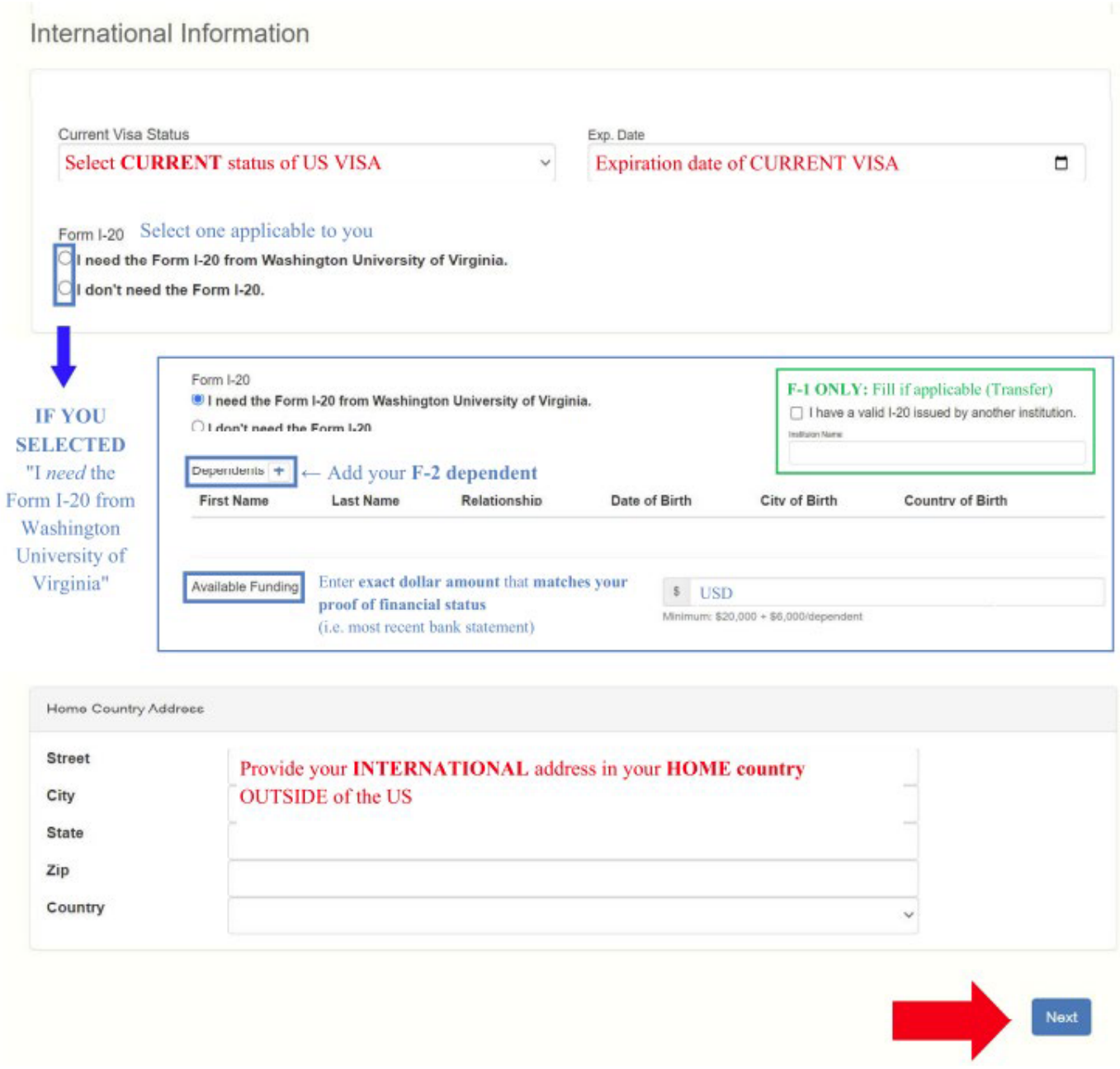
STEP 11: Fill in your **international information** as instructed below.



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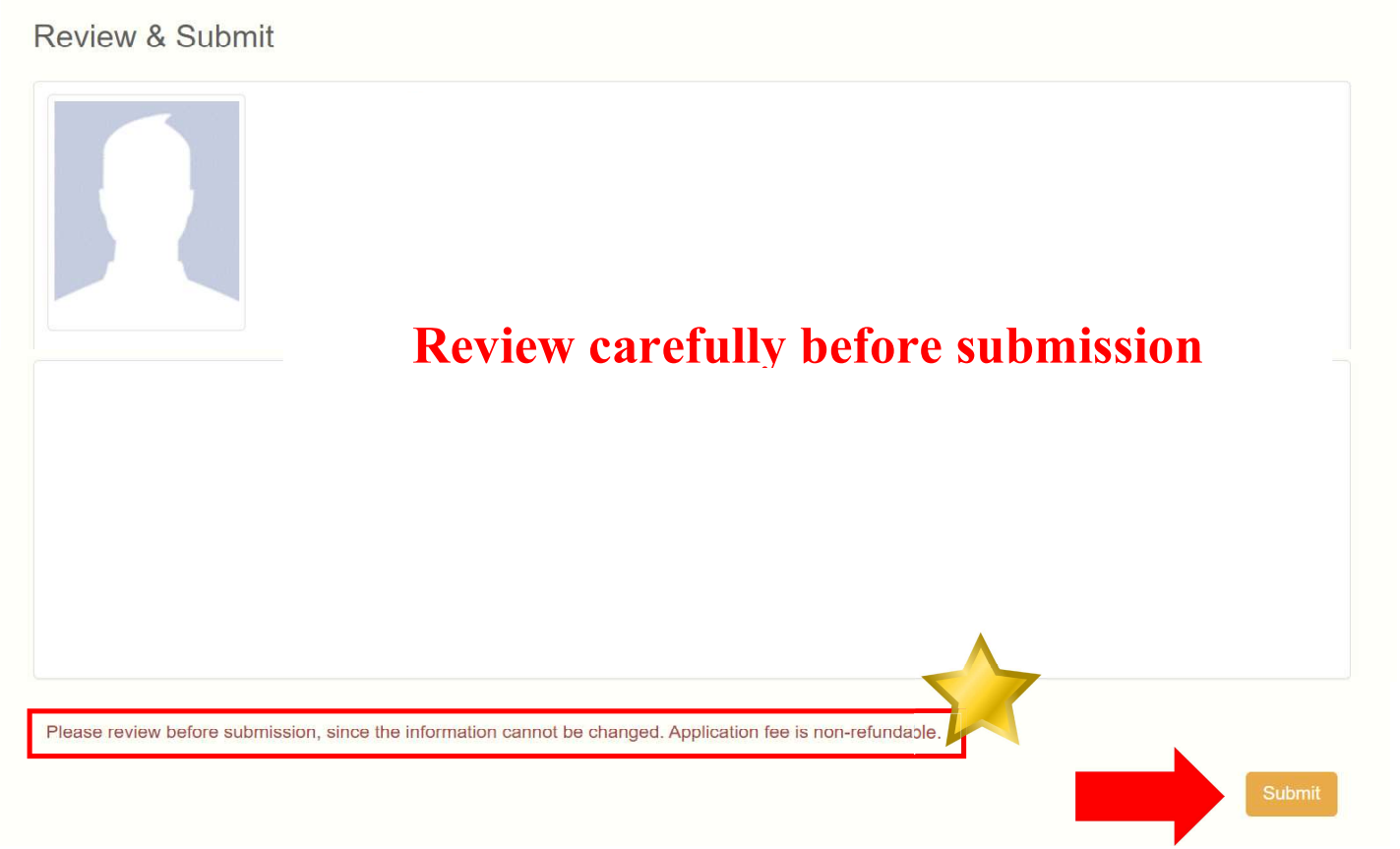
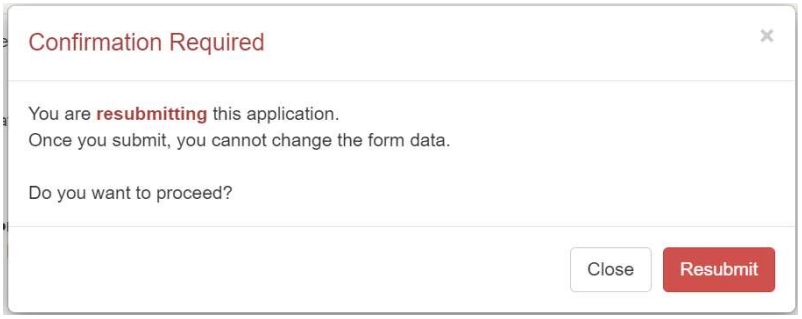
STEP 12: **Review** all sections to check all information are correct



Note: We understand mistakes happen. If you wish to make a change after submission, please let us know and we will re-open your application for a re-submission



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STEP 13: Carefully **read** Terms and Conditions

Enter **payment** information for the **NON-REFUNDABLE $100 Application Fee**

Submit the Application Form

Terms and Conditions

General Guides

Application Process and Admission Regulation

1. Admission information is available at the Office of Admissions or School website http://www.wuv.edu
2. Applicants are expected to submit all requirements for admission.
3. Each applicant will be notified of the decision for admission.
4. The School is not responsible for students who missing WUV student orientation.
S. All regular fees are non-refundable

Grievance Policy

Detailed Grievance Policy can be found in School Catalog, Complaints, which cannot be resolved by direct negotiation with the school in accordance to its written grievance policy, may be filed with the State Council of Higher Education for Virginia, 101 N. 14th Street, 9th Floor, James Monroe Building, Richmond, VA, 23219. All student complaints must be submitted in writing. Students will not be subjected to adverse by any school official as a result of initiating a complaint.

Non-Discrimination Policy

☐ I have read and agree to the terms and conditions.

Check to acknowledge

Application Fee Payment

Name on Card — Name **as shown on your card**

Card Number — 16-digit number **as shown on card**

Expiration Month / Year — MM / YY

CVC Security Code — CVC — 3-digit Security Code **on back of your card**

Amount $ USD — $ 100.00

Billing Address [redacted] USE THIS

Street

City

State

Zip Code Postal Code

Country

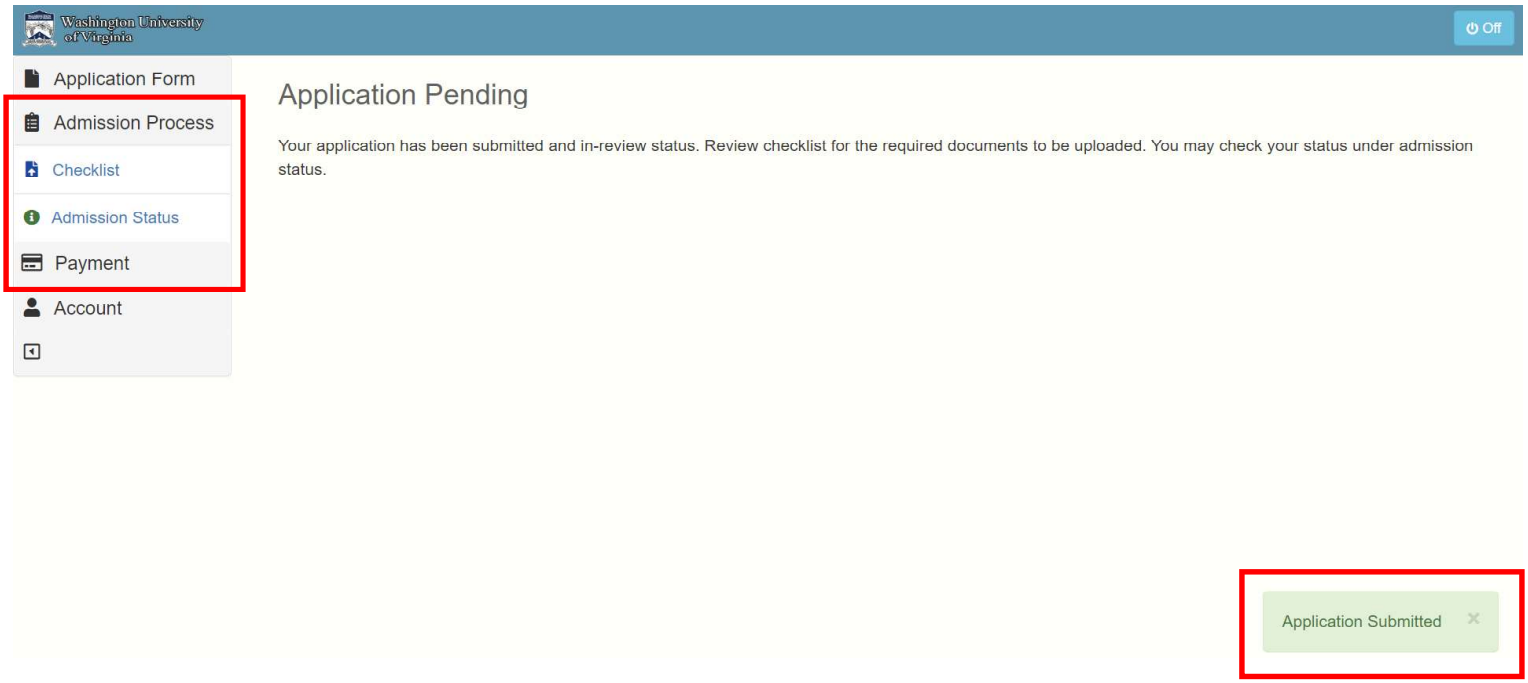
Please double check this is the accurate **BILLING** address for your payment method.

Your payment will be **DECLINED** if the address does not match.

Close | Pay & Submit

STEP 14: Once payment is made successfully, you will see this **confirmation** page

*Notice the **new sections** added to the menu on left*



STEP 15: Click **"Payment"** and **"Transaction History"** to view the status of payment you just made

