



**Select Campus:**

- Los Angeles = LA
- Ontario = OT
- Phoenix = PH

**Select Term:**

- Winter
- Spring
- Summer
- Fall

**Select Year:**

- 2021
- 2022
- 2023
- 2024

**Select Program of Study:**

- Bachelor of Science in Diagnostic Cardiovascular Sonography
- Bachelor of Science in Diagnostic Medical Sonography
- Bachelor of Science in Nursing (RN to BSN) Degree Completion
- Academic Associate of Science in Diagnostic Medical Sonography
- Academic Associate of Science in Cardiovascular Sonography

- Academic Associate of Science in Diagnostic Vascular Sonography
- Academic Associate of Science in Magnetic Resonance Imaging
- Diploma in Magnetic Resonance Imaging
- Diploma in Pediatric Ultrasound and Congenital Heart Disease
- Diploma in Vocational Nursing (CA)
- Diploma in Practical Nursing (AZ)

How did you hear about the school (i.e. friend, co-worker, etc.)? \_\_\_\_\_

Found us online? What did you search for? 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

Will you be applying for Financial Aid?  YES  NO Have you completed a FAFSA form online?  YES  NO

Are you a Veteran?  YES  NO Are you eligible for Veteran Benefits?  YES  NO

Please specify your Nationality: (Optional, for statistical purposes only)

- American Indian or Alaska Native
- Asian
- Black or African American
- White Non-Hispanic
- Native Hawaiian or Other Pacific Islander
- Hispanic or Latino
- Two or More Races
- Nonresident Alien

Are you proficient in language(s) other than English?  YES  NO

**Sign Application and Complete Checklist:**

Please check each item as you complete them and include them along with this application. If you have questions regarding any of the following requirements please contact the Admissions Office at the campus you wish to attend (**Los Angeles 310.289.5123 - Ontario 909.483.3808 - Phoenix 602.954.3834**). *WCUI does not discriminate based on an individual's race, religion, creed, color, national origin, ancestry, sex (including pregnancy, childbirth, or related medical conditions), military or veteran status, physical or mental disability, medical condition, marital status, age, sexual orientation, gender, gender identity or expression, genetic information or any other basis protected by federal, state or local law. For more information regarding WCUI's Non-Discrimination Policy, please see the Catalog. Additionally, information about WCUI's campus safety and security policies, drug and alcohol policies, and crime statistics is published in the College's Annual Security Report available at <https://wcu.edu/consumer-information/>.*

**For Vocational and Practical Nursing Students ONLY:** The VN and PN Program have additional requirements that will be given to the student after the initial application process below has been completed and approved by the Education Department.

**For International Students ONLY:** You MUST complete all of the Admissions requirements and be accepted to the school before any consideration will be given to your student VISA process.

<p><b>IMPORTANT</b></p> <p>I hereby certify that I have graduated from high school or the equivalent and that it is my responsibility to furnish WCUI with an original, valid high school diploma or equivalent (no copies accepted), and without which I will NOT be accepted into my program of study. If an original is not available, official transcripts will be required (no unofficial transcripts).</p> <p>_____</p> <p>Applicant <b>MUST</b> Sign Here</p>	<p><b>Items required to complete Application process:</b></p> <ul style="list-style-type: none"> <li>. Appointment to take the Entrance Exam ___/___/___</li> <li>. Completed Application Form</li> <li>. Background Check Application (Nursing Students Only, Please call Admissions for details)</li> <li>. Two Professional References (International Students Only)</li> <li>. Provide valid H.S. Diploma or Equivalent</li> <li>. Transcripts from previous schooling (if applicable)</li> <li>. Personal Statement or Essay</li> <li>. Upon acceptance, submit \$100 Registration Fee (non-refundable more than 3 days after signing agreement)</li> </ul>
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After completing the application, please sign below. If you are under 18 years old, you must have a Parent or Guardian sign as well. By signing below you acknowledge that all information provided herein is true, correct and complete to the best of your knowledge.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date