Case Western Reserve University
ALUMNI ENROLLMENT DATA
(Please Print Clearly)

*Student ID#: ______________ Date of Birth ___-___-____
(*for existing students)

E-TRM: Fall ____ Spring ____ Summer ____

Year Year Year

Name __________________________________________

Last First Middle

Male ___ Female ___ *Ethnic Group (select from codes below):____

U.S. Citizen: ___ Yes ___ No
If No, country of citizenship: ____________________________ **Visa Type: ______

Permanent Address (Street):
____________________________________________________

City: __________________ State: ______ Zip Code: ______ County: __________

Home Phone: ______________ Work Phone: ______________ E-mail: ___________

When did you attend CWRU?
____________________________________________________

If before 2008, please provide your SSN#: ________-______-________

I understand that this program is available to those not enrolled in a degree program at Case
Western Reserve University and that the cost is ten percent of the regular tuition. Furthermore, I
understand that as an Alumni Audit student, I do not receive a grade nor do I receive academic
and/or degree credit nor may I enroll in the same course for credit at any time in the future.

Signature: ______________________________ Date: __________________

*Ethnic Groups
1-American Indian/Alaska Native
2-Black/African American
3-Asian
4-Hispanic/Latino
5-White
6-Other
7-Mexican American
8-Puerto Rican Commonwealth
9-Puerto Rican Mainlander
H-Med. School Hispanic/Other
P-Native Hawaiian/Pacific Islander
Z-Nothing indicated

**Visa Types
F1-Student
F2-Dependent of student
J1-Exchange scholar
J2-Dependent of exchange scholar
B1-Temporary visitor for business
B2-Temporary visitor for pleasure
C1-Alien in transit
E2-Dependent of foreign visitor
H1-Temporary worker of merit/ability
H2-Dependent of temporary worker
H3-Trainee
H4-Spouse of H1 through H3
PR-Permanent Resident