

### Adult Studies Age Requirement Waiver Request

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**EDUCATION** – please attach a copy of all transcripts (Official copies will be required upon approval of age waiver).

Check one:  High School Diploma  GED Month/Year completed \_\_\_\_\_ GPA \_\_\_\_\_

Name of Institution: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

List all Colleges attended: \_\_\_\_\_

**WORK EXPERIENCE**

NAME OF EMPLOYER	CITY/STATE	DATES OF EMPLOYEMENT	POSITION/TITLE

Write two paragraphs describing why you would like to attend NC Wesleyan College (Use the back of this form).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*OFFICIAL USE ONLY*

Comments: \_\_\_\_\_

V.P. Adult Studies Signature: \_\_\_\_\_ Date: \_\_\_\_\_