



Virginia Military Institute

ROTC Application for Non-VMI Cadets

Full Name: _____
(Last) (First) (Middle)

Sex: Female Male Date of Birth: _____

State of Legal Residence: _____ Social Security #: _____

County of Legal Residence (if VA): _____ Country of Residence: _____

Home Address: _____ Phone: _____

Home Institution: _____

Address: _____ Phone: _____

Student's Email: _____

NOTE: Information below collected for statistical purposes only.

Race: Hispanic Non-Hispanic Not Reported

Ethnicity: Black American Indian or Alaskan Native

Asian or Pacific Islander Hawaiian/Pacific Islander

White, Non-Hispanic Not Reported

Have you previously taken courses at VMI? No Yes - If so when: _____

ROTC COURSE INFORMATION

This form should be completed and submitted to the VMI Registrar's Office by the designated registration deadline each semester.

Semester (Term & Year)	Course # & Section	Course Title

I certify that I am a full-time student and acknowledge that it is my responsibility to notify the Registrar's Office at VMI if I choose not to take or withdraw from the above activity prior to the end of classes. I further authorize the VMI Registrar's Office to release to the respective home institution specific grade information upon request and at the conclusion of each semester of registration. (NOTE: Student grades are posted directly online and can be accessed thru Post View.)

(Student's Signature)

(Date)

ROTC Approval: _____

Dean's Approval: _____

Registrar's Approval & Date: _____