

ENROLLMENT AUTHORIZATION FORM

		(First)		(Middl	e)		=
(Last)		(11130)		(iviidai	c)		
Date of Birth: _							
Student Addres						 	_
	(Street)		(City)			(State)	(Zip)
High School:							_
Course Informa	tion:						
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Semester:	Summ	er 2024 🔾	Fall 2024	\cup	Spring 2	024	
Student Resnor	nsihility						
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For assistance, please call: (304) 788-6820 I go.wvu.edu/pscaccess