

Name of Student:			Student ID:	
Campus:Ashland	New Richmond	IRice LakeSuperior		
THIS SIGNED A	Wis	CONAL LICENSURE DISCLOSURE FOR Sconsin Only Licensed Programs ENT MUST BE IMMEDIATELY RETUR TINUE YOUR ADMISSIONS PROCES	NED TO NORTH	-lwood tech
I,(Print	Name)	, am requesting admission and	d enrollment as a	student at Northwood
Technical College in the	e following program:			
	✓ One Program	Program	Program #	
		Criminal Justice Law Enforcement (720		
_		Academy)* Human Services Associate	305042	
-		Substance Abuse Education	105203 305501	
	·	gram selected above meets profession ployment in the state of Wisconsin after		•
I understand that this p	ogram may not meet	the licensure requirements of the state	in which I am cu	rrently residing. I also
understand that without	returning this signed	form, I cannot enroll in the program.		
This Attestation is effect	ive as of the date belo	w and shall expire (a) when I provide w	ritten notice of ex	piration to Northwood
Tech or (b) at the concl	usion of my enrollmen	t in the program	m, whichever is s	sooner. I have signed
this document this	day of	, 202		
Signature of Applicant				
Return Signed Docur	ment to the Address B	elow	<u>North</u>	woodTech.edu

Northwood Technical College Student Services Office

Ashland - 2100 Beaser Avenue, Ashland, WI 54806 New Richmond - 1019 S. Knowles Ave., New Richmond, WI 54017 Rice Lake – 1900 College Drive, Rice Lake, WI Superior – 600 North 21st Street, Superior, WI 54880