

# School of Applied Studies Pin Order:

**PIN COST: \$15** please include with this form, checks payable to Washburn University or cash accepted

**DEADLINE: May 1<sup>st</sup>** Return completed form with payment to **SAS Dean's Office, BE 306**

**PRINT CLEARLY**

NAME \_\_\_\_\_  
Last First WIN #

Date of Completion: Fall 20\_\_\_\_ Spring 20\_\_\_\_ Summer 20\_\_\_\_

**Circle Appropriate Program:**

Legal Studies

Addiction Counseling

Non-Profit Management

Trauma & Recovery Services

Medical Laboratory Science

Health Information Technology

HIT Coding

Magnetic Resonance

Diagnostic Medical Sonography

Occupational Therapy Assistant

Physical Therapist Assistant

Radiologic Technology

Radiation Therapy

Respiratory Therapist

Student Signature: \_\_\_\_\_

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

**OFFICE USE ONLY**

Check

Cash

Total: \$ \_\_\_\_\_