



UNIVERSITY
of HAWAII®
MĀNOA

UNIVERSITY PREPARATION PROGRAM APPLICATION

Please attach your
photograph here

SEMESTER APPLYING FOR: Spring 2014
 Fall 2014 Spring 2015

Please fill in the information completely and clearly.

I. PERSONAL INFORMATION

Name (as shown on passport): Family/Last Given/First Middle

Date of Birth (month/day/year): _____ / _____ / _____ Gender: Male Female

Country of Birth Country of Citizenship

Email Address: _____

Permanent Mailing Address (in home country) Street

City Province/Territory Country Postal Code

Home Telephone Cellular Fax Number

Address in Hawaii *(to be filled in upon arrival)*

City Postal Code Phone

II. ELIGIBILITY

I graduated from _____ / _____ / _____
 NAME OF HIGH SCHOOL CITY/COUNTRY IN MONTH/YEAR

List every college, university, or other post-secondary school attended, if any.

Name of institution	City/Country	Dates attended (from.....to...)	Date diploma received

(Submit copies of high school or university transcripts with application.)

English is NOT my first (native) language.
 I took the TOEFL or IELTS on _____ (Month/year)
 I took the SAT exam on _____ (Month/year)
(Submit copy of test results with this application, if available.)

III. APPLICANT CERTIFICATION

I certify that the above information is complete and accurate to the best of my knowledge. I understand that providing incomplete, incorrect, or false information may result in the denial of my admission to or dismissal from the program. I agree to adhere to all program policies during my term of study.

DATE

SIGNATURE

III. RISK AND RELEASE

Assumption of Risk and Release

The personal safety of our students is a major concern at Outreach College. Dangerous activities are avoided and not endorsed by the program. Students may be required or invited to participate in activities off-campus as part of the UP program. Your signature on this form releases the University and its employees from responsibility in the event of damage to personal property, personal injury, or death while on a program activity, including transportation to and from the activity. **Please read below, sign and date.**

I, the undersigned, in full recognition and appreciation of the dangers and hazards inherent in the UP program and during transportation to and from UP activities, to which I may be exposed during my enrollment and participation in UP, do hereby agree to assume all the risks and responsibilities surrounding my participation in that program or activities undertaken as an adjunct thereto; and further, I do for myself, my heirs, executors, and administrators hereby defend, hold harmless, indemnify, release and forever discharge the University and all its officers, agents and employees from and against any and all claims, demands, and actions, or cause of action, on account of damage to personal property or personal injury, or death which may result from my participation, and which result from causes beyond the control of, and without the fault or negligence of the University, its officers, agents or employees, during the period of my participation as aforesaid.

IN WITNESS WHEREOF, I have caused the release to be executed this

_____ day of _____, 20____
DATE MONTH YEAR

SIGNATURE