

# UNIVERSITY OF HAWAII AT MĀNOA • GRADUATE DIVISION

University of Hawaii at Mānoa • Graduate Admissions Office • 2540 Maile Way, Spalding 354 • Honolulu, HI 96822  
Tel: (808) 956-8544, 956-8045 • V/T: (808) 956-4257 • Email: [info@grad.hawaii.edu](mailto:info@grad.hawaii.edu) • Web: <http://www.hawaii.edu/graduatestudies>

## Disclaimer

Information contained herein is subject to change without notice and supersedes information contained in the UHM Catalog. For current information on graduate studies, please visit the UHM Graduate Division's Web site for prospective students as listed above.

### Application Processing Information

The Graduate Division begins processing of admissions applications starting **October 1** for the fall semester and **May 1** for the spring semester. It is recommended that you provide a complete graduate admissions application as early as possible as admissions decisions and offers of financial support such as assistantships, scholarships, fellowships and tuition waivers are awarded to highly qualified prospective students well in advance of posted application deadlines.

## Fall 2008 - Spring 2009 Instructions for Completing the Graduate Admissions Application Form

### Summer 2009 Applicants

Write in your semester of application if you are applying to a graduate program with summer admission.

#### 1. U.S. Social Security Number

If you have a U.S. social security number, please provide it here.

#### 2. Ethnicity

This information is requested solely for the purpose of satisfying federal reporting requirements and does not affect admission. Select the alpha code of the category that you believe represents your ethnic background.

CODE	ETHNIC BACKGROUND	CODE	ETHNIC BACKGROUND
AA	African American or Black	CA	Caucasian or White
AI	American Indian / Alaskan Native	HS	Hispanic
	ASIANS		PACIFIC ISLANDERS
CH	Chinese	HW	Native Hawaiian/Part-Hawaiian
FI	Filipino	SA	Samoan
IN	Asian Indian	TO	Tongan
JP	Japanese	GC	Guamanian or Chamorro
KO	Korean	MC	Micronesian (except Guamanian or Chamorro)
LA	Laotian	OP	Other Pacific Islander
TH	Thai	MP	Mixed Pacific Islander
VI	Vietnamese		
OA	Other Asian		
MA	Mixed Asian	MX	Mixed Race

#### 3. Full Legal Name

Do not use nicknames.

International applicants: Use name as listed on your passport.

#### 4. Other Names

List other names under which your test scores, transcripts, or other documents may be identified.

#### 5. Non-U.S. Citizen Immigrant Status or Visa Type

If you are a non-U.S. citizen **CURRENTLY** residing in the United States, check ✓ the immigrant status or visa type that applies to you.

#### 6. Email Address

If you provide an email address, you will receive notification of your application status by email. If you do not provide an email address, you will receive notification by mail.

**7. Intended Graduate Program and Degree Objective**

Use the PROGRAM NAMES and DEGREES found at <http://www.hawaii.edu/graduatestudies/fields/html/fields.htm>.

The Ecology, Evolution and Conservation Biology (**EECB**) specialization and the Marine Biology (**MB**) specialization are supported by participating graduate programs found at the website above. If you are interested in admission to one of the specializations, write in EECB or MB after the supporting graduate program name and degree. Example: **Botany-MA-EECB**

**8. Change of Graduate Program**

For current UHM graduate students, check ✓ this box if you wish to apply for a change in your graduate program.

**9. Dual Degree Program**

Check ✓ this box if you are applying to a dual degree program.

**Established Dual Degree Programs**

- Business Administration & Nursing
- Business Administration & Public Health
- Library and Information Science & American Studies
- Library and Information Science & Asian Studies
- Library and Information Science & Computer Science
- Library and Information Science & History
- Library and Information Science & Pacific Islands Studies
- Nursing & Public Health

**10. Authorization for Release of Information**

If you wish, provide the name of a friend or family member authorized by you to access information regarding your application status. **NOTIFICATION OF FINAL ADMISSIONS DECISION IS BY MAIL ONLY.**

**11. Applicant's Certification**

Read and sign the certification. Falsification, withholding of information, or failure to list all schools attended may result in rejection of your application or disciplinary action if discovered after enrollment.

# UNIVERSITY OF HAWAII AT MĀNOA • GRADUATE ADMISSIONS APPLICATION FORM

Mail-in completed form to: University of Hawaii at Mānoa • Graduate Admissions Office • 2540 Maile Way, Spalding 354 • Honolulu, HI 96822 • Tel: (808) 956-8544, 956-8045 • VT: (808) 956-4257 • Email: [info@grad.hawaii.edu](mailto:info@grad.hawaii.edu) • Web: <http://www.hawaii.edu/graduatestudies>

PLEASE TYPE OR PRINT CLEARLY.

SEMESTER <input type="checkbox"/> FALL 2008 <input type="checkbox"/> SPRING 2009	1. U.S. SOCIAL SECURITY NUMBER, IF AVAILABLE.  _____/_____/_____	GENDER <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	BIRTHPLACE (State or Country)	BIRTH DATE MM DD YY / /	2. ETHNICITY	
3. FULL LEGAL NAME (Do not use nicknames. International applicants: Use name as listed on passport.) FAMILY/LAST _____ FIRST _____ FULL MIDDLE _____						
4. OTHER NAMES (under which transcripts, records, or test scores may be issued):	COUNTRY OF CITIZENSHIP <input type="checkbox"/> United States (If you have dual citizenship for the United States and another country, check United States.) <input type="checkbox"/> OTHER _____ Specify country. Indicate immigrant status or visa type in #5.	5. NON-U.S. CITIZEN IMMIGRANT STATUS OR VISA TYPE <input type="checkbox"/> U. S. PERMANENT RESIDENT Date Received (MM/DD/YY) _____ <input type="checkbox"/> F-1 STUDENT VISA <input type="checkbox"/> OTHER VISA (specify) _____				
CURRENT MAILING ADDRESS CITY/PROVINCE _____ STATE/COUNTRY _____ ZIP/POSTAL CODE _____		VALID UNTIL (MM/DD/YY) _____ CURRENT TELEPHONE Area Code ( ) _____				
PERMANENT MAILING ADDRESS CITY/PROVINCE _____ STATE/COUNTRY _____ ZIP/POSTAL CODE _____		PERMANENT TELEPHONE Area Code ( ) _____ OTHER TELEPHONE Area Code ( ) _____				
6. EMAIL ADDRESS _____ FAX NUMBER _____ Area Code ( ) _____						
7. INTENDED GRADUATE PROGRAM (Refer to website listed above.)				DEGREE OBJECTIVE		
				8. <input type="checkbox"/> CHANGE IN GRADUATE PROGRAM		
				9. <input type="checkbox"/> DUAL DEGREE PROGRAM		
Have you applied for graduate admissions to UHM previously? <input type="checkbox"/> No <input type="checkbox"/> Yes (semester & year) _____		Were any of your ancestors Hawaiian? (optional) <input type="checkbox"/> No <input type="checkbox"/> Yes		10. Person authorized by you to access info regarding your application status:		
NAME OF HIGH (SECONDARY) SCHOOL FROM WHICH YOU GRADUATED		STATE or COUNTRY		GRADUATION DATE (MM/YY)		
<b>SUMMARY OF COLLEGE/UNIVERSITY ATTENDANCE. Provide an official transcript from each institution. See page D-4 for additional space. List bachelor's degree(s) first; advanced degree(s) second, if any; and all other institutions of college/university level, regardless of the length of attendance. International applicants: List actual name of degree received or expected, DO NOT translate or interpret in terms of U.S. equivalent.</b>						
FULL NAME OF INSTITUTION (Do not use initials.)	LOCATION (city, state or country)	ENTERED (MM/YY)	THROUGH (MM/YY)	MAJOR or PROGRAM OF STUDY	NAME OF DEGREE OR DIPLOMA RECEIVED or EXPECTED	DATE RECEIVED or EXPECTED (MM/YY)
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FOR OFFICE USE ONLY APPLICATION FEE CC CH		R N M F J S G C E H TUITION STATUS: by _____ on _____ UH ID: _____			ADMISSIONS TYPE ST (Standard) CC (Concurrent) CH (Change Field) STUDENT TYPE M R C T GEOG L M I	

SIGNATURE REQUIRED ON NEXT PAGE

**SUMMARY OF COLLEGE/UNIVERSITY ATTENDANCE:** Continued from page D-3.

NAME OF INSTITUTION (Do not use initials.)	LOCATION (city, state or country)	ENTERED (MM/YY)	THROUGH (MM/YY)	MAJOR/ PROGRAM OF STUDY	NAME OF DEGREE OR DIPLOMA RECEIVED OR EXPECTED	DATE RECEIVED OR EXPECTED (MM/YY)
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**FOR INTERNATIONAL APPLICANTS ONLY**

Provide permanent foreign address, if different from the permanent mailing address provided on previous page.

PERMANENT FOREIGN ADDRESS \_\_\_\_\_ CITY / PROVINCE \_\_\_\_\_ STATE / COUNTRY \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

How did you learn about the UHM graduate programs? Check all that apply.

- a. UHM Web site
- b. UHM Alumni
- c. UHM Faculty
- d. UHM Brochure
- e. Recruitment Fair
- f. Other Faculty recommendation
- g. Reputation/Strength of Program
- h. College/University Guide
- i. Newspaper/Advertisement
- j. Parent
- k. Friend
- l. Other \_\_\_\_\_

**11. CERTIFICATION OF APPLICANT**

I hereby certify that the answers and responses for all items on this application form are complete and true to the best of my knowledge and belief. I understand that providing incomplete, incorrect, or false information may result in the rescission of admission and subject me to the requirements and/or disciplinary measures as provided under the University's Student Code.

Signature of Applicant **X** \_\_\_\_\_ Date \_\_\_\_\_