

# UNIVERSITY OF HAWAI‘I AT MĀNOA • GRADUATE PROGRAM SUPPLEMENTAL INFORMATION FORM

Use this form unless otherwise instructed by your graduate program. Check your graduate program requirements at:  
<http://www.hawaii.edu/graduatestudies/fields/html/fields.htm>.

**Summer 2010 Applicants** - Please write in your semester of application if you are applying to a graduate program with summer admission.

TYPE OR PRINT CLEARLY. MAIL-IN THE COMPLETED FORM DIRECTLY TO YOUR INTENDED GRADUATE PROGRAM.

Semester <input type="checkbox"/> FALL 2009 <input type="checkbox"/> SPRING 2010	Intended Graduate Program	Degree Objective	Concentration / Specialization (if any)					
Full Legal Name      Family / Last		First	Full Middle					
Current Mailing Address		City / Province	State / Country	Zip / Postal Code				
Telephone (      )		Fax (      )	Email Address					
Provide the name(s) of the UHM faculty member(s) you have personally communicated with regarding your admission to UHM, if any:								
List academic honors: e.g. fellowships, other scholarly awards. A curriculum vitae or resume may be submitted in lieu of this statement.								
Indicate the nature of your activities since you received your undergraduate degree. A curriculum vitae or resume may be submitted in lieu of this statement.								
ACADEMIC REFERENCES Name:		Name:						
Telephone (      )		Telephone (      )		Telephone (      )				
Bachelor's Degree - University/College		State/Country	Date Awarded	Program of Study				
				Grade Point Average				
Master's Degree - University/College		State/Country	Date Awarded	Program of Study				
				Grade Point Average				
Name of institution (List below course(s) in progress.)	Course Number	Level of Course Undergraduate or Graduate	Descriptive Title of Course					
				Credit Hours				
SELF-REPORTED STANDARDIZED TEST SCORES								
GRE General Test	Verbal	Quantitative	Analytical	Writing	Date	GRE Subject Test Subject Taken:	Score	Date
						TOEFL		
GMAT			Total			IELTS		
I certify that the answers and responses provided on this form are complete and correct to the best of my knowledge and belief.								
Signature of Applicant <input type="checkbox"/>						Date _____		