



Chaminade University

OF HONOLULU

APPLICATION FOR ADMISSION UNDERGRADUATE DAY PROGRAMS ALL APPLICANTS*

1. **Submit completed application form and personal statement.**
2. **Submit \$50.00 application fee.**
If paying by credit card, contact the Admissions Office at (808) 739-8340 or call toll-free 1-800-735-3733 and ask for the Admissions Office.
3. **Submit required documents, stated below, based on your application status.**
4. **Submit official test results. ♦**

Native Speakers of English: take either the Scholastic Aptitude Test (SAT) or American College Test (ACT). *(If test results from the SAT or ACT are included on your official high school transcript, you are not required to have them sent from the testing service.)*

Non-native Speakers of English: take either the Test of English as a Foreign Language (TOEFL), the English Language Proficiency Test (ELPT) or International English Language Testing System (IELTS).

♦ Note: Does not apply to Transfer Applicants with more than 24 semester credits.

5. **When mailing required documents, indicate OFFICE OF ADMISSIONS in mailing address.**

HIGH SCHOOL APPLICANT*

- Submit an official transcript directly from your high school.

TRANSFER APPLICANT*

- Submit official transcript(s) from each college/university attended and a list of courses in progress if applicable.
- If you have earned less than 24 semester credits, submit an official high school transcript and SAT or ACT score results.

ADDITIONAL NURSING APPLICATION REQUIREMENTS*

- (250) word minimum "Personal Statement." *Please tell us why you are applying to Chaminade's School of Nursing.*
- 2 letters of recommendation

HOME-SCHOOLED FRESHMAN APPLICANT*

- Submit official documentation of all high school courses attempted with corresponding grades or transcripts. If a General Education Diploma (GED) is available, submit the GED transcript. A GED is required in most cases if other documentation cannot be provided.
- Submit documentation or certification from a Department of Education or Board of Education that a formal home school curriculum has been completed.

INTERNATIONAL APPLICANT*

- Send official, certified copies of all non-U.S. School transcripts/gradesheets/marksheets/exam results (for example, A-Levels, O-Levels, etc.) stamped with the official school seal to World Education Services, Inc. (WES) for a Course-by-Course Report. For more information or to request a WES application, visit the WES website at www.wes.org.

Recommended Application Deadlines are May 1 for the Fall semester and December 1 for the Spring semester. Applications are accepted on a space available basis after recommended deadlines.

**Additional documentation may be required at the request of the Office of Admissions.*

CHAMINADE UNIVERSITY OF HONOLULU

Office of Admissions

3140 Waiialae Avenue, Honolulu, Hawaii 96816-1578

(808) 735-4735 • Fax (808) 739-4647

1-800-735-3733

Please type or print clearly

I. APPLICANT INFORMATION

Social Security Number: _____ - _____ - _____

Name: _____
Last (Family Name) First MI Maiden (If applicable)

Prefer to be called: _____
(Nickname)

Mailing Address: _____
City State Zip

Permanent Address: _____
(If different from above) City State Zip

E-mail: _____

Phone: () _____ - _____ Cell: () _____ - _____ Fax: () _____ - _____

Would you like to receive text messages from Chaminade? Yes No

I am applying as: <input type="checkbox"/> New Freshman <input type="checkbox"/> Unclassified <input type="checkbox"/> Returning (last attended _____) <input type="checkbox"/> Transfer <input type="checkbox"/> Early Admission <input type="checkbox"/> Evening to Day			<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Term applying for: <input type="checkbox"/> Fall 20____ <input type="checkbox"/> Spring 20____
--	--	--	--	---

Citizenship

U.S. Citizen
 U.S. National
 Permanent Resident

} State or Territory of Residence: _____

Non U.S. Citizen

What is your Country of Citizenship? _____

Do you require an I-20/VISA to study in the U.S.? Yes No

For students previously issued an I-20: SEVIS ID# _____

Gender: Female Male

Birthdate: _____/_____/19____
Mo Day Yr

What academic area(s) of interest do you plan to pursue? 1) _____ 2) _____
(See list of majors available on last page. If you are unsure about your major at this time, write "Undecided")

Do you plan to live on-campus? Yes No (On-campus housing is NOT guaranteed upon acceptance to Chaminade.)

Do you intend to apply for financial aid? Yes No (Priority deadlines for financial aid are March 1 for the Fall term and October 1 for the Spring term)

How did you learn about Chaminade? _____

What most influenced your decision to apply to Chaminade University? Other: _____
(Please indicate one source only—see code list on last page) Code

Additional Information (optional)

Place of Birth: _____ Religious Preference: _____

How would you describe yourself? Please select all that apply:

Do you consider yourself Hispanic/Latino? Yes No

- | | | | |
|---|-----------------------------------|---|---|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Chinese | <input type="checkbox"/> Micronesia | <input type="checkbox"/> White |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Filipino | <input type="checkbox"/> Palauan | <input type="checkbox"/> Nonresident Alien <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Black / African American | <input type="checkbox"/> Hawaiian | <input type="checkbox"/> Other Pacific Islander | |
| <input type="checkbox"/> Chamorro | <input type="checkbox"/> Japanese | <input type="checkbox"/> Samoan | |
| | <input type="checkbox"/> Korean | <input type="checkbox"/> Vietnamese | |

Are any of your ancestors Native Hawaiian? Yes No

II. FAMILY INFORMATION

Father's Full Name: _____ Mother's Full Name: _____

Legal Guardian's Full Name (if not parent): _____

Information sent to parent(s)/guardian should be addressed to: Parents jointly Father Mother Legal Guardian

Please provide the mailing address and phone number for the person(s) indicated above:

_____ Street _____ City _____ State _____ Zip _____ Phone _____

Parent's E-mail Address: _____

Did one or both of your parents receive a 4-year degree from a college or university? Yes No

III. ACADEMIC INFORMATION

HIGH SCHOOL INFORMATION

Please list all high schools (9th through 12th grades) attended, beginning with the most recent. Please attach additional pages if necessary. International students must have the equivalent of a U.S. high school diploma.

Name of High School:	Location of School:	From: (Mo/Yr)	To: (Mo/Yr)	Grad Date	GED

COLLEGES/UNIVERSITIES ATTENDED

Please list all colleges/universities attended, beginning with the most recent. Please attach an additional page if attended more than three colleges/universities.

Name of School:	Location:	From: (Mo/Yr)	To: (Mo/Yr)	Name of Degree/Major:	Grad Date

TEST REQUIREMENTS

Please check the appropriate box and indicate the date:

I *have taken* the SAT test. Date: _____ Results sent to CUH? Yes No

ACT test. Date: _____ Results sent to CUH? Yes No

I *will take* the SAT test. Date: _____

ACT test. Date: _____

Is English your first language? Yes No If no, please indicate your first language: _____

If English is not your first language, the Test of English as a Foreign Language (TOEFL) or the English Language Proficiency Test (ELPT) is required.

Please check the appropriate box and indicate the date:

I *have taken* the TOEFL/ELPT _____ Date: _____ Results sent to CUH? Yes No

I *will take* the TOEFL/ELPT _____ Date: _____ Official test results should be requested from the testing services and sent directly to Chaminade's Office of Admissions. Tests must have been taken within the past 2 years.

IV. EXTRACURRICULAR ACTIVITIES

Briefly describe your involvement in any high school organizations, honor societies, clubs, athletics, community projects, volunteer work or special interests you may have. Please attach a separate page if necessary.

Activity/Position Held:	Responsibilities:	From: (Mo/Yr)	To: (Mo/Yr)

