



UNIVERSITY OF THE WEST

APPLICATION FOR ADMISSION

1409 N. Walnut Grove Ave.

Rosemead, CA 91770

Telephone: 626.571.8811

E-mail: [admission@uwest.edu](mailto:admission@uwest.edu)

Web site: [www.uwest.edu](http://www.uwest.edu)

**APPLICATION CHECK LIST –**

1. APPLICATION FEE – [ ] \$50 Domestic Students; [ ] \$100 International Students;  
*(The application fee must accompany the application and is **non-refundable**. Check or money order should be payable to University of the West).*
2. COMPLETED APPLICATION FORM *(with signature)*;
3. STATEMENT OF PURPOSE – two pages, typed and double-spaced;
4. OFFICIAL TRANSCRIPTS from each school, college or university attended;
5. COPIES OF DIPLOMA for all degrees earned;
6. THREE LETTERS OF RECOMMENDATION;
7. OFFICIAL TOEFL SCORE REPORT *(for International Students or non-native English-speaking students)*;  
A minimum score of 173 on the computer-based test or 61 on Internet Based Test is required for undergraduates;  
A minimum score of 213 on the computer-based test or 79 on Internet Based Test is required for graduates;

~ **ADDITIONAL FOR INTERNATIONAL STUDENTS** ~

1. BANK VERIFICATION *(a regular bank statement is not acceptable)*;
2. FINANCIAL SPONSOR AGREEMENT FORM *(if applicable)*;
3. COPIES OF PASSPORT;
4. COPIES OF VISA, AND I-94 *(if applicable)*;
5. PREVIOUS COPIES OF I-20s *(for transferring students only)*;
6. TRANSFER RELEASE FORM *(for transferring students only)*;

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**PLEASE SUBMIT THE COMPLETED APPLICATION AND FEE TO:**

**OFFICE OF ADMISSIONS  
UNIVERSITY OF THE WEST  
1409 N. WALNUT GROVE AVE.  
ROSEMEAD, CA 91770**

*Any questions? Please contact us at 626.571.8811 ext. 120 or [admission@uwest.edu](mailto:admission@uwest.edu)*

**APPLICATION DEADLINE -**

Fall ----- June 1  
Spring ----- September 2  
Summer ----- April 1

Application deadlines for transfer students may be extended. Contact the Admissions office for more information.

**For Financial Aid information,  
call 626-571-8811 ext. 121 or ext. 122.**

**Or visit our web site at**

**[www.uwest.edu](http://www.uwest.edu)**



APPLICATION FOR ADMISSION

PLEASE TYPE OR PRINT CLEARLY IN BLACK OR BLUE INK ALL INFORMATION ON THIS APPLICATION

Application Term: [ ] Fall [ ] Spring [ ] Summer Year:
Do you need an I-20? [ ] Yes [ ] No Are you a Transferring Student? [ ] Yes [ ] No

I. STUDENT INFORMATION

1. Name: Last (Family Name) First Middle Initial

2. Social Security Number: 3. Date of Birth (MM/DD/YY):

4. E-mail: Secondary E-mail:
You must provide an e-mail address that you check regularly and plan to keep until you enroll at UWest.

5. Phone (Home): Phone (Cell):

6. Current Mailing Address: Street City State/Province
Country Zip (International Postal Code)

7. Permanent/International Mailing Address: Street City State/Province
Country Zip (International Postal Code)

8. Are you a U.S. Citizen? [ ] Yes (Go to Item 9) [ ] No (Complete the following) Driver's License #:
If you answered "no," what is your country of citizenship:
Indicate your immigration status as of the date you submit this application: [ ] Resident Alien [ ] Nonimmigrant (please answer a. b.)
a. If currently in the United States, type of VISA you hold (ex: F-1, etc.)
b. For your studies at the University, type of VISA for which you have applied or plan to apply:

9. Are you a monastic? [ ] Yes [ ] No Dharma Name:
If "yes," give the name of the order or lineage with which you are associated:
University of the West does not discriminate on the basis of race, ethnicity, national origin, religion, age, gender, disability, sexual orientation, or any other classification that deprives any person of their rights as a valued individual.

II. ETHNIC BACKGROUND

10. Please mark only one category and subcategory, if appropriate.
[ ] American Indian or Alaskan Native: All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.
[ ] Asian or Pacific Islander: All persons having origins in any of the original peoples of the Far East, Southeast Asia or the Pacific Islands. Please check one:
[ ] Asian Indian [ ] Cambodian [ ] Chinese [ ] Taiwanese [ ] Filipino
[ ] Guamanian [ ] Hawaiian [ ] Japanese [ ] Korean [ ] Laotian
[ ] Samoan [ ] Vietnamese [ ] Other Asian [ ] Other Pacific Islander
[ ] Black/African American (not of Hispanic origin): All persons having origins in any of the black racial groups of Africa.
[ ] Hispanic/Latino: All persons of Chicano, Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin regardless of race.
[ ] White (not of Hispanic origin): All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

Student Information

Ethnic Background

III. ACADEMIC PROGRAM: Check the degree or program you intend to pursue at University of the West.

11. Degree: [ ] Bachelor [ ] Master [ ] Ph.D. [ ] Three-in-One [ ] Dual Program [ ] Certificate

12. Undergraduate Programs:

Table with 4 columns: Religious Studies, Business Administration, Languages, Humanities & Social Sciences. Each column lists program options with checkboxes.

13. Graduate Programs:

Table with 3 columns: M.A. or Ph.D. Religious Studies, Business Administration, M.A. Psychology w/ Concentrations in. Each column lists graduate program options with checkboxes.

14. Certificate Programs: List level (UG or GR) \_\_\_\_\_ and Certificate Program name \_\_\_\_\_ (refer to catalog)

15. Extended Studies Program: [ ] Religious Studies Certificate Program (Undergraduate Certificate only).

16. Do you plan to attend: [ ] Full-time (Graduate taking at least 9 units, undergraduate taking at least 12 units). [ ] Part Time
Have you applied to UWest before? [ ] No [ ] Yes, indicate term [ ] Fall [ ] Spring [ ] Summer Year \_\_\_\_\_
Were you admitted? [ ] No [ ] Yes, indicate term [ ] Fall [ ] Spring [ ] Summer Year \_\_\_\_\_
Did you enroll? [ ] No [ ] Yes, indicate term [ ] Fall [ ] Spring [ ] Summer Year \_\_\_\_\_

IV EDUCATIONAL HISTORY:

17. Name of high school from which you graduated/will graduate: \_\_\_\_\_
Graduation/Date: Month \_\_\_\_\_ Year \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_
[ ] Check here if you completed the GED instead of graduating from high school.

18. List all colleges, universities and preparatory schools attended, beginning with the most recent.
YOU MUST SEND SEALED OFFICIAL TRANSCRIPTS FROM EACH INSTITUTION ATTENDED.

Table with 5 columns: Name of School, Location (city, state & country, if not in the U.S.), Dates of Attendance (From, To), Degrees conferred and/or expected degree.

V. EMERGENCY CONTACT: In case of emergency, please contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone (home): \_\_\_\_\_ Phone (cell): \_\_\_\_\_

Address: \_\_\_\_\_  
 Street City State Zip Code

E-mail: \_\_\_\_\_

VI. Statement of Purpose:

On separate sheets of letter-size paper, describe your scholarly and professional plans, as well as your interest in a specific area of emphasis within your field of study, in a typed, double-spaced essay of 400-500 words.

Statement of Purpose

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I certify that the information I have given on this application is complete and correct to the best of my knowledge and that I have attended or am attending no institution other than those listed. I understand that any misrepresentation may be cause for denial or cancellation of admission or enrollment. I further understand that it is my responsibility to have forwarded to UWest all official school records together with all other application materials; these documents become the property of UWest and will not be returned to me or duplicated for my own use for any reason. I also understand that if I am accepted to UWest, my admission is subject to verification of all official records from the institutions I have attended, including notice of graduation, when appropriate, and is contingent upon satisfactory completion of all course work prior to entering UWest. I further acknowledge that the application fee is non-refundable.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (MM/DD/YYYY)

| For Office Use Only                               |          |                          |             |
|---------------------------------------------------|----------|--------------------------|-------------|
| Determination Pending                             | Domestic | International: Visa Type | I-20 Needed |
| Application reviewed by: _____                    |          | Date: _____.             |             |
| Scholarship or waiver authorized – reason: _____. |          |                          |             |
| By: _____.                                        |          |                          |             |

Applicant's Affidavit