

## **Newport International University**

**Administrative Office** 6700 Fallbrook Ave. #260 West Hills, CA 91307 www.niu-edu.us (818) 356-4742

## Application for Admission (Page 1 of 2)

NameFirst	Middle	Last
Previous Names:		
Birth date:/	Gender: Male / Female	Social Security #:
Mailing Address:		Work/Day Telephone: ( )
Number/Str	reet	Home Telephone: ( ) -
City, State, Postal C	Code, County	
Permanent		Email:
Home Address:	reet	Email:
City, State, Postal Cod	e, Country	<u> </u>
Have you ever applied at Newport Int	ernational University?	When?
Previous NIU Student ID #		Month / Year
	rogram for which you are	1: 1: (: 0)

## Academic Data (This section MUST be completed)

List in chronologically order all colleges and other educational institutions attended including high school. Please contact college/universities attended to have official transcripts sent directly to Newport International University of the country you are enrolling. Please provide an official English translation of the degrees earned, if not in English.

High School	Location	<b>Dates Enrolled</b> FROM TO	<b>Units Completed</b>	Degree/ Date
College / University	Location	Dates Enrolled	<b>Units Completed</b>	Degree / Date

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Professional Data (Optional-for admissions to undergraduate programs only): Please attach professional resum	ıe,
copies of certificates, and other supporting materials indicating training received (including) course hours.	

I hereby make application for admission to Newport International University. The nontraditional concepts utilized by the University have been explained to my complete satisfaction. I further understand that the University is legally authorized to award degrees to all students who meet graduation requirements. All fees and tuition must be paid in full prior to graduation. The application and registration fees are non-refundable.

Applicant's Signature	Date

NIU OFFICE USE ONLY			
Documents Received on	NIU ID#		
Monthly Roster's Date	Processed by		