University of Hawai'i at Mānoa (UHM) Graduate Division

University of Hawai'i at Mānoa • Graduate Admissions Office • 2540 Maile Way, Spalding 354 • Honolulu, HI 96822 Tel: (808) 956-8544 • TTY: (808) 956-4257 • Email: 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.

Concurrent Graduate Certificate Program Application Form

Use this application **ONLY** if you are seeking admission to a graduate certificate program and are currently enrolled as a classified graduate student at UHM. If you are not currently enrolled in a graduate program at UHM, follow the standard admissions procedures for prospective students.

Application Fee

No application fee waivers or deferments are granted. Application fees are non-refundable and may not be used for an application submitted at a later date. Payment by check or money order must be in U.S. dollars drawn on a U.S. bank and made payable to the "University of Hawai'i." Include your full name and date of birth on payment.

Concurrent Graduate Certificate Application Fee Credit Card Payment Form						
Attach completed form to the front of your applicat	ion.					
Semester of Application (Please check one)		☐ Spring 20				
Name of ApplicantFAMILY/LAST	F	IRST		FULL MIDDLE		
Date of Birth//////YY						
Credit Card Type : ☐ VISA ☐ MasterCard	☐ Diners					
Account Number////						
Expiration date /						
Provide the three (3) digit security code located on the	back of your credit	card at the end of tl	he signature line:_			
Name of Card Holder (As indicated on card)FAMILY/LAST		FIRST		FULL MIDDLE		
Billing Address Number and street	Apt. Number	City	State	Zip/Postal Code		
Application fee for academic year: 2011-12 - US\$70.00)					
I agree to pay the appropriate graduate admissions that the application fee is non-refundable and non-		ccording to the car	rd issuer agreem	ent. I understand		
All tuition and fee charges at the University of Hawai'i cand/or action by the Board of Regents or university administration		ct to change in acc	ordance with requ	irements of State law		
Card Holder Signature	· · · · · · · · · · · · · · · · · · ·	Dat	te			

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Submit completed form and application fee payment to:
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Part I. To be completed by student			
Semester Applying For: Fall 2	20 Spring 20		
Name	FIRST	UH ID No.	
Mailing Address	APT. NO	CITY	STATE ZIP CODE
Current Phone #			
Graduate Program	LIZATION IF APPLICABLE	Date of Graduation	SEMESTER & YEAR
Intended Graduate Certificate			
Student Signature		Date	
Part II. To be completed by the Certifica	_		
Approved for Fall 20			
Not Approved			
Certificate Program Director Signature	9	Date	
For Office Use Only APPLICATION FEE CC CH DATE	CURRENT TUITION CODE PER SGASTDN	Н	ADMIT TYPE: CC STUDENT TYPE: C GEOG L M I
	PROCESSED BY DATE		