

Name of Applicant:

(As shown in passport) Family / Last Name First Middle

Date of Birth: _____
Month/day/year

Gender: Male Female

Birthplace: _____
Country

Citizenship: _____
Country or Countries

Term Applying: Fall Winter Spring Summer Year: _____

Intended Program of Study: Liberal Arts Program College Preparatory Program

English Proficiency: Native English Speaker English as a Second Language

Permanent Address:

Street Address

City Prefecture/Province/State Postal Code Country

() Telephone Email

Billing Address:

Name of Responsible Party (Sponsor) Relationship: _____

Street Address

City Prefecture/Province/State Postal Code Country

() Telephone Email

Mailing Address: (if different from Permanent Address)

Street Address

City Prefecture/Province/State Postal Code Country

() Telephone Email

Visa Status: I am **NOT** currently in the U.S. I do **NOT** have a student visa and need one to enter the U.S.
 I am currently in the U.S. I have a valid student (F-1) visa from former school(s) I attended.

High School Graduated From:

Name, Location from _____ to _____
Month/Year Month/Year

College/University Attended:

Name, Location from _____ to _____
Month/Year Month/Year

Certification by Applicant: All of the information provided on this application form is true to the best of my knowledge.

Signature of Applicant Date

Question: How did you hear about Hawaii Tokai International College?

Name of Applicant**1) Source of Financial Support**

While enrolled at Hawaii Tokai International College (HTIC), my educational and living expenses will be paid for by the following sources: *(check all that apply)*

Personal or Family Resources:

Name of Sponsor

Street Address

City, Prefecture/Province/State, Postal Code

Country

Other Sponsor: *(institution, scholarship, or other sponsor)*

Name of Sponsor

Street Address

City, Prefecture/Province/State, Postal Code

Country

2) Certification by Sponsor

I/We will be responsible for the financial support of the applicant while the student is enrolled at Hawaii Tokai International College.

*** A bank statement showing that I/we have the required funds of USD \$23,685.00 is attached.**

Signature of Sponsor

Date

3) Certification by Applicant

The information provided is true to the best of my knowledge. I understand that a student visa is issued solely for the purpose of pursuing a full-time program of study.

Signature of Student

Date

Name of Applicant

Please use this page for your Admissions Essay (attach an additional page if needed), or use this page as a cover sheet if you write your essay on a separate page (or pages).

Please submit a 250-500 word, double-spaced, typed essay that tells the Admissions Board about who you are, what interests you and how the Hawaii Tokai International College (HTIC) Associate of Arts in Liberal Arts program will help you reach your goals.

INFORMATION WILL BE HELD IN STRICT CONFIDENCEExpected term of Enrollment: Fall Winter Spring Summer Year: _____Name: _____
Family / Last Name First MiddleDate of Birth: _____ Gender: Male Female
Month/day/yearPermanent Home Address: _____
Street Address_____
City State/Prefecture/Province Postal Code Country

Home Telephone: (_____) _____ Alternate Phone: (_____) _____

EMERGENCY CONTACT: Name: _____ Relationship: _____

Home Telephone: (_____) _____ Alternate Phone: (_____) _____

1) Do you have any significant medical/mental health conditions or disabilities that might limit participation in academic or physical activities? Yes No (If Yes, please specify): _____

★ Please also attach a letter signed by your physician that states diagnoses and treatment/medication history.

2) Do you have any allergies? Yes No (If Yes, please specify): _____**3) Are you currently taking any prescribed medications on an ongoing basis?** Yes No (If Yes, please specify): _____

My signature indicates that all information on this form is honestly represented and factually correct to the best of my knowledge:

Student Signature_____
Date**Authorization and Consent for Treatment of Minors under the age of 18 years old:** I, the parent /legal guardian of (Print Student Name) _____, certify that the responses provided are honestly represented and true to the best of my knowledge. I also hereby authorize transport and/or admission to the hospital for observation and/or administration of treatment, X-rays, injections or drugs that may be considered necessary by the physician in attendance while the minor student is in attendance at Hawaii Tokai International College (HTIC), if the undersigned cannot be contacted._____
Signature of Parent or Legal Guardian_____
Date

**PLEASE USE THIS CHECKLIST TO ENSURE YOUR APPLICATION PACKET IS COMPLETE.
SUBMIT COMPLETED APPLICATION MATERIALS TO:**

**Hawaii Tokai International College
Office of Admissions
91-971 Farrington Hwy
Kapolei, HI 96707**

Tel: 808-983-4202

Fax: 808-983-4107

Email: admissions@tokai.edu

- Application Form
- Supplemental Application (Financial Support Statement)
- Official bank statement verifying availability of funds
- Admissions Essay
- Official transcripts from high school and/or all postsecondary institutions attended
- Certificate of High School Graduation
- Student Health Clearance Form
- Copy of Passport
- \$100 Application Fee
- Housing Application (if applicable)
- \$20 Housing Application Fee (if applicable)
- Letter of recommendation (optional)