

Application for Study Abroad

□ Stuttgart □ Koeln □ Berlin/Hamburg □ Dortmund

1. Agent Details

Name of Agent

Office

I hereby nominate the below Agent to submit this application to Hawai'i Pacific University (HPU) on my behalf including all necessary documents, and to act as my representative for all future correspondence.

GOstralia!-GOzealand!

Given name	
Middle name(s)	
Family name	
Citizenship	
Country of birth	
Date of birth	/(dd/mm/yyyy)
Gender	nale female
Are you Hispanic or Latino?	□ Yes □ No
Please list all ethnicities that apply to you (i.e. Caucasian, African American, etc.)	
Did your parents attend university?	□ Yes □ No
Is English your first language	□ Yes □ No
What is the primary language spoken at home?	
3. Contact Details	
Country	
Street name & number	
City	
Postcode	
Home phone	(+)
Mobile phone	(+)
E-Mail Address	
4. Study Abroad Program Information	
Proposed start date	□ Fall □ Spring Year: 20
Proposed duration	□ 1 Semester □ 2 Semesters
How many credits would you like to take?	□ 12 CP □ 15 CP (Undergraduate/Bachelor) □ 9 CP □ 12 CP (Postgraduate/Master)
Have you applied to HPU before?	□ No □ Yes, ID:

5. Visa Application History	
Have you ever had a visa application rejected?	□ No □ Yes, please complete below
Country	
Reason	
Have you ever been found responsible for academic or behavioral misconduct at any educational institution?	□ No □ Yes, please attach an explanation
Have you ever been found guilty or convicted of a misdemeanor or felony? (answer no, if the conviction is sealed, annulled, pardoned, etc.)	□ No □ Yes, please attach an explanation
6. English Language Qualification All applicants are required to provide evidence of their proficie	
Have you sat an English language test?	□ No
Took date	Yes, Test:
Test date	/(dd/mm/yyyy)
Test score	
7. Tertiary Education (if any) (University Are you currently enrolled in a tertiary institution?	y, etc) □ Yes □ No
Country	
Name of institution	
Degree program (Bachelor/Master/etc.)	
Name of program/study area	
Start date	/ (mm/yyyy)
Proposed end date	/ (mm/yyyy)
Have you already completed another tertiary program? (if yes, complete below)	□ Yes □ No
Country	
Name of institution	
Degree program (Bachelor/Master/etc.)	
Name of program/study area	
Start date/ (mm/yyyy)	End date/ (mm/yyyy)
P. Disability Information	·
B. Disability Information Do you have a disability or ongoing medical condition that will require you to seek	□ No □ Yes:
special assistance from the University?	

9. Emergency Contact	
First Name	
Last name	
Relationship	
Phone	(+)
Email	
Country	
Street name & number	
City	
State	
Postcode	
letter. The minimum balance must cover tuition semester or \$22,225 for Graduate per semester	ement, government financial guarantee or scholarship and living expenses (\$26,490 for Undergraduate per er). Financial documents must be less than 3 months old
Source of Funds	□ Self □ Family
	□ Other:
each application form submitted. Applications will not be puthis section to submit your Application Fee payment via Cre	ate or US\$55 for graduate plus a US\$200 deposit must be paid with rocessed unless accompanied by the Application Fee. Please complete edit Card.
Name on card	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Type of card	□ Visa □ Master □ American Express □ Diners
Card number	
Expiry date (mm/yyyy)	CCV/Security code
Address of Credit Card Holder	
Country	
Street name & number	
City	
Postcode	
Home phone	(+)
Mobile phone	(+)
E-Mail Address	

☐ I certify that I have read all the information regarding enrollment and I-20 processing and the information I am providing in the application is true to the best of my knowledge. (https://studyinthestates.dhs.gov/students/prepare/students-and-the-form-i-20) ☐ I agree that Hawai'i Pacific University (HPU) securely stores my data and I understand that I can withdraw my information at any time by writing to admissions@hpu.edu. HPU Privacy Policy is available at: https://www.hpu.edu/about-us/privacy-policy.html and our EU GDPR policy is available at: https://hpu.teamdynamix.com/TDClient/KB/ArticleDet?ID=54538. ☐ I have attached a bank statement, sponsor's bank statement, government financial guarantee or scholarship letter. ☐ I certify that all the information I am providing in the application is true to the best of my knowledge. I verify all is true and correct. ☐ I hereby permit GOstralia!-GOzealand! to submit the information which I have provided on this form to HPU via an electronic online application form.

Signature ______ **Date** _____ (dd/mm/yyyy)

12. Declaration and Signature