HAWAII TOKAI
INTERNATIONAL COLLEGE

APPLICATION FOR ADMISSION
(International Student)

Name of Applicant: _____
(As shown in passport) Family / Last Name First Middle

Date of Birth: _____ ***Gender:*** ☐ Male ☐ Female
Month/day/year

Birthplace: _____ ***Citizenship:*** _____
Country 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:

_____ Relationship: _____
Name of Responsible Party (Sponsor)

_____
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:

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

College/University Attended:

_____ from _____ to _____
Name, Location 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?

_____

HAWAII TOKAI
INTERNATIONAL COLLEGE

SUPPLEMENTAL APPLICATION
Financial Support Statement

_____

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 $22,725.00 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

HAWAII TOKAI INTERNATIONAL COLLEGE

HTIC HOUSING APPLICATION

**** ALL STUDENTS ARE RESPONSIBLE FOR UNDERSTANDING THE HOUSING RULES & REGULATIONS****

Please print clearly or type:

I AM APPLYING FOR: ☐ Fall ☐ Winter ☐ Spring ☐ Summer Year: _____

Name: _____ ☐ Male ☐ Female

Family / Last Name First Middle

Mailing Address: _____

_____

City State/Prefecture/Province Postal Code Country

Email: _____ Telephone: (___) _____

First Language: _____ Date of Birth: _____

Month/day/year

☐ **Option #1 – On-campus Residence Hall**

(Select double room or quadruple room)

☐ Double room ***($2,000 per term + meals***)

☐ Quadruple room ***($1,700 per term + meals***)

- Communal bathrooms

Option #1 only - Choose one meal plan below:

☐ **100 meals ($900)** ☐ **110 meals ($990)** ☐ **120 meals ($1080)**

☐ **Option #2 – Kalaeloa Rental Homes**

- 3 Bedrooms/ 1-2 Bathrooms
- 4 Students per rental home
- Utilities, Wi-Fi and maintenance included
- ***$2,250 per term***

Briefly describe your lifestyle and the type of roommate you would prefer:

_____

_____

_____

Please list any health concerns or special needs of which the school should be aware:

_____

_____

_____

NOTE:

1) Submission of this application does not guarantee housing or housing preference.
2) Students matriculating from Tokai Educational System affiliated high schools are required to complete a two-term residency in on-campus housing.
3) All residents are required to vacate the residence hall during the Winter Break. (See Academic Calendar)
4) Application fee of $20, security deposit of $100, and linen charge of $75 will apply in addition to the cost of housing.
5) All fees are subject to change without prior notice.

Applicant's Signature: _____ **Date:** _____

HAWAII TOKAI
INTERNATIONAL COLLEGE

ADMISSIONS ESSAY

_____

Name of Applicant

Please use this page and the next (if needed) for your Admissions Essay, 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.

Submit all Completed Information:
Hawaii Tokai International College
Office of Admissions and Records
91-971 Farrington Highway
Kapolei, HI 96707, USA
Fax: 808.983.4202

HAWAII TOKAI INTERNATIONAL COLLEGE

STUDENT HEALTH CLEARANCE FORM

INFORMATION WILL BE HELD IN STRICT CONFIDENCE

Expected term of Enrollment: ☐ Fall ☐ Winter ☐ Spring ☐ Summer Year: _____

Name: _____
Family / Last Name First Middle

Date of Birth: _____ ***Gender:*** ☐ Male ☐ Female
Month/day/year

Permanent 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**

HAWAII TOKAI
INTERNATIONAL COLLEGE

INTERNATIONAL APPLICATION PACKET CHECKLIST

PLEASE USE THIS CHECKLIST TO ENSURE YOUR APPLICATION PACKET IS COMPLETE.

INCOMPLETE APPLICATION PACKETS WILL NOT BE REVIEWED FOR ADMISSION.

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