

Hawai'i Pacific University

www.hpu.edu/exchange

Application Guide for the Student Exchange Program at Hawai'i Pacific University

Dear Incoming Exchange Student Applicant,

Thank you for applying to the Student Exchange Program at Hawai'i Pacific University (HPU). Please complete this application and <u>mail</u> this and the requested documents to:

Melissa Matsubara Hawai'i Pacific University Office of International Exchange and Study Abroad Programs 1164 Bishop St., Suite 200 Honolulu, Hawai`i 96813 USA

You may save this application guide on your computer and complete it by typing the information in the sections marked in gray. Hand written applications will not be accepted.

A color scan of your passport information page **must** be included with your application.

After we receive your complete application with all required documents, we will send you the items due on the June 1st deadline. HPU will then mail you your acceptance letter and DS-2019 Certificate of Eligibility for Exchange Visitor J-1 Status. After you receive the DS-2019, pay the SEVIS fee at https://www.fmjfee.com and print a copy of the receipt.

The Fall 2015 <u>mandatory</u> immigration check-in/ orientation for incoming exchange students will be on **Monday, August 24, 2015** at HPU. Please plan flights accordingly.

Note: Off-campus housing for exchange students is available via: www.campushousing.com/hawaii and must be arranged by the student.

Application Checklist:

	Completed Exchange Student Application Form
	Color passport copy
	Exchange Student Status Verification. (To be completed by the Student Exchange Coordinator)
	English Test Score (Original), if applicable <u>Undergraduate English requirements</u> , <u>Graduate English requirements</u>
	Academic Transcript(s) (Original)
	Graduate students only: Conferral of Undergraduate degree
	Proof of Financial Sponsorship/Bank Statement (Original)
	Health Clearance Form 1B for MMR Immunization Verification *Please note that the Hawai`i State Department of Health has recently proposed adding more routinely recommended vaccinations to the list of required immunizations. Students planning to attend classes in Fall 2015 and beyond may need to provide proof of the following vaccinations: Meningococcal, Tetanus/Diphtheria/Pertussis and Varicella. We will share information as soon as it is made available to us by the Hawaii State Department of Health.
*All ite	ems above need to be submitted with the application.

Application Deadlines:

Fall 2015 Admission Deadlines				
May 1	 Application Health Clearance Form 1B for MMR Immunization Verification 			
June 1	 Course Request Form *Immunization Verification for Meningococcal, Tetanus/Diphtheria/Pertussis and Varicella 			
Upon Arrival	 International Health Insurance Waiver Form Health Clearance Form 2: Tuberculosis Clearance (required if studying in Hawaii for 5 months or longer) 			

If you have any general questions about the Student Exchange Program, please contact:

Melissa Matsubara, Director, International Exchange Programs Hawai'i Pacific University

E-mail: studyabroad@hpu.edu • Website: www.hpu.edu/exchange

Application for Admission to the Student Exchange Program at Hawai'i Pacific University

Student Data

(Please print data exactly as it appears on your passport)

Last Name (Family Name): First Name							
(Given Name):							
Middle Name:							
Gender: Male [Female	Date of Birth: (month/Day/Year)	M:	D:	Y:	_	
Country of Birth:						_	
City of Birth:						_	
Country of Citizenship:						_	
Native Language:						_	
Country of Legal Permanent Residency:						_	
Permanent Address:							
	Numb	er and Street					
City:	Po	stal Code:		Countr	y:		
Phone (including count	ry code):					<u> </u>	
E-mail:						_	
Emergency Contact I	nformatior	(Required)					
Name:			Relation:				-
Phone:			Email:				-
Work Phone:							_
Current Address:							
	Νι	ımber and Street					•
City:	F	Postal Code:		c	ountry:		-

Exchange Student Status Verification

(To be completed by the home university Student Exchange Coordinator)

First/Given Name:	Last/Fam	ily Name:
Title or Position:	Email:	
Name of University:	Phone:	
Mailing Address:	City:	Country:
	Postal Co	ode:
This is to certify that:	Student's First a	
has been selected to be an off exchange term(s):		Pacific University for the following
Year student is applying for:	<u> </u>	
Semester(s) or Session(s) appl	ying for:	
Fall Semester (August – De	ecember)	
Spring Semester (January -	- May)	
Level of Study:	ndergraduate (Bachelor degree)	Graduate (Master degree)
Home University Exchange Coordinator Signature:		
accepts a variety of English lang	ish, you are required to produce pro uage tests. Undergraduate : <u>www.h</u> ssions info/Intl apps.html. Please no	, , ,
I have taken an English proficier	ncy test in the past two years: YES] NO
Name of test:	Score:	Year taken:

HPU Academic Information

Academic Information

*Check the major that most closely resembles your home university program of study. (PLEASE ONLY CHOOSE $\bf ONE$ MAJOR)

Field of Study (Mandatory):	
[] Accounting	[] Hospitality Tourism Management
[] Advertising and Public Relations	[] Human Resource Management
[] Anthropology	[] Humanities
[] Asian Studies	[] Integrated Multimedia
[] Biochemistry	[] International Business
[] Biology	[] International Studies
[] Business Economics	[] Journalism
[] Chemistry	[] Justice Administration
[] Communication	[] Management
[] Computer Information Systems	[] Marine Biology
[] Computer Science	[] Marketing
[] Diplomacy and Military Studies	[] Mathematics
[] Economics	[] Multimedia Cinematic Production
[] Elementary Education	[] Nursing
[] English	[] Oceanography
[] Entrepreneurial Studies	[] Political Science
[] Environmental Science	[] Psychology
[] Environmental Studies	[] Public Administration
[] Finance	[] Social Work
[] General Business	[] Sociology
[] Health Science	[] TESOL
[] History	
University Transcripts	to the comment by the manufactor into English Additionally release
·	ts (these must be translated into English). Additionally, please I that are not listed on your university transcript.
Current program of study at home universi	ty:
Current Courses:	

Updated: 29Jan2015

Date (mm/dd/yy)



Exchange Students Statement of Financial Sponsorship

Office of Admission

1164 Bishop Street Honolulu, Hawai'i 96813 Phone: (808) 544-0238 www.hpu.edu/admissions

Sponsor's Signature

	One Semester	Two Semesters
Housing and Living Expenses	\$6,665	\$13,330
Related Expenses	\$2,450	\$4,900
Total	\$9,115	\$18,230

The United States Immigration Services requires that Hawai'i Pacific University verifies the financial resources of all international student applicants. This form is for that purpose. You are required to certify that you will have funds available for the costs listed. The estimated costs don't include transportation costs to and from the United States. The estimated costs don't represent the total expenses of your program if longer than nine months.

All sections of this Statement of Financial Sponsorship Form must be completed along with the required documentation before a DS-2019 Form can be issued. ~5% increase is expected for AY 2015-2016 estimated expenses. We may ask for additional financial documents once the new amount is available if the difference is not represented in the original bank letter provided with this form

Арр	licants Must Complete ALL Sections Below:	
Student Information		
Last Name	First Name	Middle Initial
By signing, I understand that I am requi that I will have sufficient funds to cover	red by U.S. Immigration law to provide HPU with adequate my studies in the United States.	documentation indicating
Student Signature	Date (mm/dd/yy)	
To be completed by parent, far	nily member, guarantor, or applicant even if sup	port is personal fund
I am aware of the costs of an education	n at Hawai'i Pacific University and I assume financial respo	nsibility for the sponsored
student's expenses.		
My relationship to this student is		
Address of Sponsor		
	Telephone	
*Documentation of financial resources	in the form of a bank letter must accompany this affidavit	of support.
	Statement of Financial Responsibility	
Financial Resources	Qualifications and Required	Amount In U.S. dolla
1. Personal/Family/Sponsor Savings	Submit official financial statement on bank letterhead Including a current balance of the account. The letter should be dated no	
	earlier than six months before the term you intend to enroll at HPU.	
2. Government or Sponsoring Agency	Submit your award letter.	\$
A	dditional Costs to Show For Dependents	
Will you be bringing any dependents	with you to the United States?	
Spouse:YesNo	Additional cost to show for spouse: \$	5,000

Print Name



Admission Office

1164 Bishop Street Honolulu, Hawai'i 96813 Phone: (808) 544-0239 Fax: (808) 544-1168 admission@hpu.edu

Printed Physician Name

Health Clearance Form 1B

MEASLES, MUMPS, RUBELLA (MMR) IMMUNIZATION VERIFICATION

The State of Hawai'i requires written evidence of health clearance from measles, mumps and rubella. Students must comply with these health clearance requirements by completing this form and returning it to HPU.

Please use this form if necessary to submit the second result of MMR.

Last Name/Surname	First Name		Middle Initial
·			
Address			
Street Address	City/ Town	Country	ZIP Code
Telephone	Date of Birth (mm/dd/yyyy)	HPU Student ID Num	ber
Student Signature	Date		
Measles, Mumps, ai	nd Rubella Immunity Waiver F	Form	
The following clearance	nd Rubella Immunity Waiver F e is to be filled out and signed or st octor of osteopathy (DO), advance	tamped by any of t	
The following clearance medical doctor (MD), deassistant or clinic.	e is to be filled out and signed or st octor of osteopathy (DO), advance t be waived if student meets ONE o	tamped by any of t ed practice register	red nurse (APRN), physican'
The following clearance medical doctor (MD), deassistant or clinic. MMR immunization may proper verifying docum	e is to be filled out and signed or st octor of osteopathy (DO), advance t be waived if student meets ONE o	tamped by any of ted practice register	ed nurse (APRN), physican's
The following clearance medical doctor (MD), do assistant or clinic. MMR immunization may proper verifying documents. 1. Student was because of the control of the contro	e is to be filled out and signed or stoctor of osteopathy (DO), advance be waived if student meets ONE cents:	tamped by any of the practice register of the following cite by of birth certific	ed nurse (APRN), physican's
The following clearance medical doctor (MD), do assistant or clinic. MMR immunization may proper verifying docum 1. Student was b 2. A physician had 3. A laboratory report of Oster	e is to be filled out and signed or stoctor of osteopathy (DO), advanced be waived if student meets ONE cents: orn before 1957 (mail official cognitions)	tamped by any of the practice register of the following cite by of birth certific st Titer Test") is signed Registered Nurse	red nurse (APRN), physican's eria AND can submit the ate) ned by Medical Doctor (ME
The following clearance medical doctor (MD), do assistant or clinic. MMR immunization may proper verifying docum 1. Student was book 2. A physician had 3. A laboratory report of Oster Assistant (PA)	e is to be filled out and signed or stoctor of osteopathy (DO), advanced be waived if student meets ONE control of the control of the past of the past of the past open of immunity (such as the "eopathy (DO), Advanced Practical of the past of the past open of immunity (such as the "eopathy (DO), Advanced Practical of the past of the past open of immunity (such as the "eopathy (DO), Advanced Practical of the past open open open open open open open open	tamped by any of the practice register of the following cite by of birth certific st (Titer Test") is signed Registered Nurse ionery.	red nurse (APRN), physican's eria AND can submit the ate) ned by Medical Doctor (ME

U.S. State of License



Incoming Exchange Student

COURSE REQUEST FORM

Please read the back of this form, where instructions are given on how to find courses and complete this form correctly.

Family/Last Name	Given/First Name	Country of Citizenship	HPU Student ID#
			@

PRIMARY COURSE REQUESTS

Please list 4 or 5 courses, depending on the number of credits you need.

	Advisor Approval	Course Title	Course Alpha (i.e. WRI1100)	CRN #	Section	Campus	Days	Times
1								
2								
3								
4								
5								

Remarks:

ALTERNATE COURSE REQUESTS

Please list 5 alternate courses, in case your primary choices are not available.

	Advisor Approval	Course Title	Course Alpha (i.e. WRI1100)	CRN #	Section	Campus	Days	Times
1								
2								
3								
4								
5								

Remarks:

Examined by:	Date and Time:

HPU Course Request Form

For past course syllabi: http://apps.hpu.edu/cis/web/index.php/search

Fall due date: June 1st
Spring due date: November 1st

For instructions on how to find course options for HPU below:

- 1. Open this link: https://bweb.hpu.edu:4443/hpud/bwckschd.p disp dyn sched
- 2. Select 'Spring 2015'
- 3. Select the subject you are interested in
- 4. Under course level, select 'Undergraduate*' or 'Graduate*'
- 5. Hit 'class search' button
- 6. Select course
- 7. Once you click on the course, please pay attention to the 'Remaining' section. If it says '0,' that course is full and we will not be able to register you for it.

<u>Please note</u>: Fall course schedules will not be available until mid-March and Spring course schedules will not be available until Mid-October.



IMPORTANT (please read carefully!):

• Once we register you for a full course load, you will only be able to make changes to your schedule in person with an HPU academic advisor. By that time many courses may be full, so please review the courses carefully as it may be difficult to change your schedule.

- All international students are required by U.S. regulations to be enrolled full-time.
 - Undergraduate* minimum: 12 credits
 - Graduate* minimum: 9 credits
- Students may not register for more than 16 credits (5 courses) of undergraduate or more than 12 credits (4 courses) of graduate level of study
- All programs offered by HPU are open to exchange student enrollment as long as student meets all course prerequisites, which will be determined by an HPU academic advisor and the appropriate academic department.
- In addition to any online classes, undergraduates must take at least 3 courses in class (not online) and graduates must take at least 2 courses in-class (not online).
- Undergraduate* applicants may take only undergraduate classes and graduate* applicants may take only graduate classes. Please do not mix up the levels of classes!
- There is a fee each time you add or drop a class once the semester begins.
- Pay attention to the location of the class! We have several campuses: Downtown, Hawaii Loa Campus, the Oceanic Institute, and Online. There is an HPU shuttle available between Downtown and HLC, however please give yourself at least 30 minutes to commute between the different campuses when selecting classes.

Please note the class locations for each campus.

DOWNTOWN

MP = Model Progress building

FC = Frear Center FS = Hawaii Pacific

University building

LB = Lower Bishop UB = Upper Bishop

KK = Kukui Plaza

HAWAI'I LOA CAMPUS

AC = Academic Center NA1 = Nursing Annex 1

OCEANIC INSTITUTE

OI= Learning Center

For questions, please email studyabroad@hpu.edu

*Undergraduate= Bachelor level courses

*Graduate = Master level courses