1. PERSONAL INFORMATION

For Office Use Only

Banner ID: Session Start:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Family/Last Name** (as listed on passport) | | **Given/First Name** | | | | **Middle Name** |
| **Home Country Mailing Address City/Province Postal Code Country** | | | | | | |
| **Mailing Address (if different from above) City/Province Postal Code Country** | | | | | | |
| **Date of Birth**    **Month/Day/Year** | **Gender**  **Female**  **Male** | | **Telephone** | | **Email** | |
| **Country of Birth** | | | | **Country of Citizenship** | | |

**2. EDUCATION**

|  |  |  |
| --- | --- | --- |
| **Name of Secondary/High School** | **City & Country** | **Date of Graduation (Expected)**  **Month/Year** |
| **Name of College/University/Post-Secondary School Attended** | **City & Country** | **Dates of Attendance**  **From (Month/Year) -- To (Month/Year)** |
| **Name of College/University/Post- Secondary School Attended** | **City & Country** | **Dates of Attendance**  **From (Month/Year) -- To (Month/Year)** |

3. PROGRAM INFORMATION

An official TOEFL or IELTS score is required to apply directly to the undergraduate degree program. The minimum scores required are: TOEFL 500 PBT, 61 IBT, IELTS 5.5, Step Eiken 2A. Select one of the following:

I am applying directly to the undergraduate degree program. I am submitting an official TOEFL, IELTS or Step Eiken test result. If you meet the required score above, **select one of the following start dates:**  
  
2017/2018 Credit Start Date: Aug 21, 2017 Jan 8, 2018  May 21, 2018  July 2, 2018   
  
I am applying for the English Language Institute (TOEFL or IELTS not required). S**elect one of the following start dates:**  
  
2017/2018 ELI Start Date:Aug 21, 2017 Oct 23, 2017 Jan 8, 2018  March 5, 2018 June 18, 20184. STUDY PLAN

Select program you want to pursue

|  |  |  |
| --- | --- | --- |
| **English Language Institute Only** | **2 Year Associate Degree**  (May include English Language Training)  Major: | **4 Year Liberal Arts Transfer Degree**  2 Years at Leeward + 2 Years at Transfer University  (May Include English Language Training) |

**5. APPLICATION FEE & OPTIONAL COURIER PAYMENT (REVIEW INSTRUCTIONS PAGE)** ENGLISH LANGUAGE INSTITUTE: $100 USD  DEGREE PROGRAM $25 USD (requires TOEFL 500/61, IELTS 5.5 or Eiken 2A)  FEDEX DELIVERY $40 USD (OPTIONAL)

For Office Use Only

Full Name:

Session Start:

SID:

PAYMENT OPTIONS

**CREDIT CARD** **CHECK:** Payable to Leeward Community College in U.S. Dollars**CASH**

TO PAY BY CREDIT CARD, COMPLETE THE FOLLOWING:  Mastercard  Visa  Discover Card

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Total Amount** | **Cardholder Name** | **Credit Card Number** | | **Expiration Date** | **3 Digit Security Code** |
| **Cardholder Billing Address** | | | **Cardholder Signature** | | |

**6. FINANCIAL INFORMATION (SELECT ONE)** **I AM PAYING MY OWN EXPENSES AND SUBMITTING A CURRENT BANK STATEMENT THAT IS IN MY NAME**I certify that the information submitted with this application is correct, that I intend to register at Leeward Community College, and that I will be responsible for meeting all costs associated with the program.

**THE FOLLOWING FINANCIAL SPONSOR IS PAYING MY EXPENSES:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Family/Last** | **First/Given** | | | **Middle** |
| **Mailing Address City/Province Zip/Postal Code Country** | | | | |
| **Email** | | **Phone Number** | **Relationship to Applicant** | |

I certify that the above information submitted with this application is correct, that the student I am sponsoring intends to register at Leeward Community College, and that I am responsible for meeting all costs associated with the program.

|  |  |
| --- | --- |
| **Signature of Sponsor** | **Today’s Date** |

**7. FAMILY** (Complete only if you plan to bring your spouse and/or children to the U.S.)IF YOU PLAN TO BRING YOUR SPOUSE AND/OR CHILDREN TO THE UNITED STATES, PROVIDE THEIR INFORMATION IN THE SPACE BELOW AND SUBMIT COPIES OF THEIR PASSPORTS

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Family/Last** | | **First/Given** | | **Middle** | |
| **Country of Birth** | **Country of Citizenship** | | **Gender**  **Female**  **Male** | | **Relationship to Student**  **Spouse**  **Child** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Family/Last** | | **First/Given** | | **Middle** | |
| **Country of Birth** | **Country of Citizenship** | | **Gender**  **Female  Male** | | **Relationship to Student**  **Spouse  Child** |

**8. APPLICANT’S SIGNATURE/CERTIFICATION**I certify that the answers and responses provided for all of the items on the University of Hawai`i - Leeward Community College International Student Application Form are complete and true to the best of my knowledge and belief. I understand that providing incomplete, incorrect, or false information may result in the rescission or denial of my admission and subject me to the requirements and/or disciplinary measures as provided under the University’s Student Conduct Code.

|  |
| --- |
| Leeward Community College 96-045 Ala Ike International Programs Office Pearl City, HI 96782 www.lcc.hawaii.edu/ipo lccintl@hawaii.edu |

**SIGNATURE OF APPLICANT DATE**

**Mission: At Leeward Community College, we work together to nurture and inspire all students. We help them attain their goals through high-quality liberal arts and career and technical education. We foster students to become responsible global citizens locally, nationally, and internationally. We advance the educational goals of all students with a special commitment to Native Hawaiians.**