

HIS UNIVERSITY

GRADUATE SCHOOL

Office of Admissions

1245 West 6th Street

Corona, CA 92882

www.hisuniversity.org

Phone: (951) 372-8080 * FAX: (951) 372-8070

INTRODUCTORY INFORMATION (영어 또는 한국어)

(Please print)

Name in full _____

LAST

FIRST

MIDDLE

Social Security Number _____

Home Phone () _____

Work Phone () _____

Electronic mail (E-mail) address _____

Current mailing address _____

STREET AND NUMBER

CITY

STATE

ZIP

Permanent home address _____

STREET AND NUMBER

CITY

STATE

ZIP

Current mailing address expiration date _____

Country of birth _____ Birthdate _____ Age _____

Race _____ Gender _____

Marital status: Single Engaged Married

Maiden Name (if applicable) _____ Name of spouse or fian'ce (e) _____

Country of Citizenship _____ Native language+ _____

Have you taken the TOEFL test lately? _____ If yes, enter score _____ and date _____

Permanent resident (card # _____) Other (specify) _____ Expiration date of visa _____

TERM OF ENTRY (STATE YEAR)

Fall _____ Spring _____ Seminar _____
Those accepted for fall are eligible to enter in summer session. Those accepted for spring are eligible to enter in interterm.

Interterm _____ Summer _____ Other _____

Will you also be attending the spring? Yes No Will you also be attending in the spring? Yes No

COURSE OF STUDY:

Applicants for these programs must submit a 1 to 2 page typewritten statement of personal introduction and outline their vocational objectives and how this program relates to those objectives.

Ed.D. Family Ed. Ed.D. Family Counseling M.A. Christian Education M.A. Christian Counseling

Doctor of Family Ministry (Ph.D.) MA in Marriage & Family Therapy B.A. in Counseling

Peer Christian Counseling (Diploma)

EDUCATIONAL EXPERIENCE

Request the Registrar of *each* college or university attended (including junior colleges, institutes and schools you are presently attending) to forward an official academic transcript directly to the Office of Admissions. If the program of study has not yet been completed, *another* transcript must be filed as soon as possible after the degree has been awarded. List all schools attended beyond high school:

SCHOOL	MAJOR	DATES OF ATTENDANCE	DEGREE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PERSONAL INFORMATION

Name of parent or nearest relative other than spouse _____ (_____) _____

Address _____	Name _____	Phone _____
NUMBER AND STREET	CITY	STATE ZIP

Names and ages of children _____

How do you plan to finance your education at HIS? _____

Have you ever had professional counseling? (Optional) _____ If yes, please submit a summary and results.

EMPLOYMENT EXPERIENCE

If currently employed, indicate position _____ Date of employment _____

Name of Company _____ Type of business _____

What business, occupational, or military experience have you had in the past? (State the nature of your work, organizations and dates involved.)

CHURCH RELATIONSHIP

Are you now a member of a church? YES NO Denomination _____

How often do you attend? _____

Name and mailing address of present "home" church _____ (_____) _____
NAME PHONE

How long have you been attending? _____ Pastor's name _____

Please explain activities and service in your church _____

CONVERSION AND CHRISTIAN GROWTH

Do you know Christ as your personal Savior? _____ Year of Conversion? _____

REFERENCES

The applicant is required to furnish two references from a professor, former employee, co-worker or personal friend.

REFERENCE #1: Name and address _____

Relationship _____ Phone () _____

REFERENCE #2: Name and address _____

Relationship _____ Phone () _____

CALL TO CHRISTIAN SERVICE

How did you first hear about HIS University? _____

Rank the three (3) most significant factors which influenced your choice to attend HIS University:

- _____ Present HIS student/friend _____ Pastor's referral _____ HIS Faculty
- _____ Alumni _____ Contact from Admissions _____ I was an undergraduate at HIS University
- _____ Relative attending _____ Visit to HIS _____ HIS Counselor
- _____ Web page _____ Other (list) _____
- _____ Magazine advertisement (specify) _____

COMMUNITY AGREEMENTS

HIS University recognized the value of maintaining certain behavioral standards that contribute to the atmosphere on campus, fosters fellowship with a wide range of Christians and, in many instances, assisting in strengthening our Christian testimony to our community. In light of this, HIS asks its students and employees to be supportive of this behavioral standard. Please indicate your intent to abide by these agreements.

WILL YOU ABIDE BY THESE COMMUNITY AGREEMENTS WHILE ENROLLED AT HIS? YES NO

HIS University reserves the right to dismiss a student who, in its judgment, does not conform either to the stated regulations governing student conduct or the expressed principles, policies, and the programs of the University.

In making application to become a student at HIS University, I agree with the doctrinal and teaching positions as described on this application (with my stated exceptions); I pledge myself to abide by the regulations of the administration and faculty; to protect the good name of the school; to preserve and protect the physical properties of HIS, and to cooperate with all members of the University family in maintaining a spirit of Christian fellowship.

DATE

APPLICANT'S SIGNATURE

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Character Reference: Professor/Employer/Pastor/Friend

TO THE APPLICANT: Print your name and address on the lines below. Applicants should provide a stamped envelope addressed to the Office of Admissions, HIS University, to the persona filing the reference.

Name of applicant _____
LAST FIRST MIDDLE

Applicant's address _____ () _____

E-mail _____

Plan to enter HIS University: ____ Fall ____ Spring Year ____ Degree sought at HIS University? _____

The Family Education Rights and Privacy Act of 1974 permits students access to certain credentials in their files. Because of the importance of preserving the confidentiality of a reference, the ct permits an applicant to waive his/her right of access to the reference. By signing below, the applicant willingly waives his/her right of access to see this recommendation, knowing tha this waiver is NOT required as a condition for admission.

Signature _____ Date _____

PLEASE NOTE: *The above-named applicant has applied for admission to HIS University and is asking you to furnish a reference. Ours is a Christian institution, and as such, our aim is to train only those students who are qualified spiritually and academically. It is essential that you be frank and accurate in your remarks and estimations. Thank you for your help.*

How long have you know the applicant? _____ In what capacity? _____

How well do you know the applicant? _____

Does the applicant's speech and conduct consistently exhibit his/her Christian beliefs? _____

How is the applicant regarded by his/her friends and community? _____

What do you consider to be his/her strengths of personality and talents? _____

What do you consider to be his/her areas where personality development is needed? _____

What is the applicant's attitude toward authority and responsiveness toward instruction? _____

Does the applicant work harmoniously with others? _____

What degree of success do you predict for the applicant in graduate studies? _____
Exceptional _____ High _____ Average _____ Mediocre _____

Do you believe the applicant is ready for the level of study for which he/she is applying? _____ If not, please explain.

It will help the Office of Admissions to more accurately appraise the applicant if you will comment on the following items. Please omit those about which you have insufficient knowledge to form an opinion.

Christian
Testimony

Character and
Spiritual Growth

Emotional stability
and behavior

Leadership Ability,
Industry, Initiative

Relationships,
Cooperation

Common
Sense

Financial
Habits

Personal Appearance
(Looks and dress)

Intelligence

Other remarks:

____ I recommend ____ I do not recommend ____ I recommend with this reservation: _____

Signature _____ Date _____ Organization _____

Name (print) _____ Position _____

Address _____

Phone (____) _____ E-mail: _____