

*undergraduate*

UOG

ADMISSIONS INSTRUCTION BOOKLET



UNIVERSITY OF GUAM  
**ADMISSIONS & RECORDS OFFICE**  
UOG STATION  
MANGILAO, GUAM 96923

PHONE: (671) 735-2201/2  
FAX: (671) 735-2203

E-MAIL: [admitme@uguam.uog.edu](mailto:admitme@uguam.uog.edu)  
WEB SITE: [www.uog.edu](http://www.uog.edu)

# Welcome to the University of Guam

The Office of Admissions & Records welcomes inquiries from prospective students and their parents. You are welcome to visit our office in the UOG Field House, Monday ~ Friday, 8am ~ 5pm. For further information see [www.uog.edu](http://www.uog.edu) or contact us at (671) 735-2201/2, fax (671) 735-2203, or email [admitme@uquam.uog.edu](mailto:admitme@uquam.uog.edu)

## Who qualifies for admission?

### REGULAR STUDENTS

- **New Freshmen:** *Students who graduated from high school (successfully completed twelve (12) years of formal education) or who passed the GED with a cumulative score of 45 or higher.*
- **Transfer Students:** *Students who previously enrolled for any college-level courses at another regionally accredited institution after graduating from high school or passing the GED.*

#### Admission Requirements:

- ✓ Complete the application for admission forms
- ✓ Request for your official high school/college transcripts to be mailed to the UOG Admissions Office
- ✓ Fulfill health clearance requirements
- ✓ Take the UOG English & Math Placement Examinations
- ✓ Submit proof of residency for tuition rate determination
- **High School Students:** *The scholarship shall be awarded to qualified high school students who are within one (1) year of graduation and enrolled in eligible high schools on Guam; and*
  - ✓ The student must be a resident of Guam for a continuous period of not less than one (1) year immediately preceding June 15<sup>th</sup> of the year the award is to be awarded.
  - ✓ The student must have an overall academic grade point average of at least a 3.0 (B) in his/her high school (10<sup>th</sup> – 12<sup>th</sup> grade) studies; and
  - ✓ The student must take the UOG Placement Examination and be placed in college level English or Math;
    - This requirement may be waived for students who participate in special programs.
  - ✓ The student must provide a written recommendation from his/her high school counselor or principal; and
  - ✓ The student must provide written approval from his/her parents or legal guardian to attend the University of Guam; and
  - ✓ The student must have the UOG class schedule approved by high school counselor prior to registration; and
  - ✓ The student must provide a copy of his/her senior high school class schedule for the term he/she enrolls under; and
  - ✓ The student must follow all academic policies, rules and regulations applicable (see UOG catalog for details);
  - ✓ The student must complete all student admission requirements of the University of Guam.
  - ✓ The student must follow all UOG academic policies, rules and regulations related to course prerequisites and enrollment in lower and upper division courses. High School students are not eligible to enroll in upper division courses.
  - ✓ The award shall cover tuition (up to 6 credit hours) and shall be a direct credit to the student's account at the UOG Business Office. NOTE: The 6 credits may be taken during separate semesters (not including Intersession).
  - ✓ The award shall cover only the equivalent of one (1) semester of part-time attendance at the University of Guam, i.e., six credits.
  - ✓ Recipients under this program shall maintain a 3.0 cumulative grade point average for courses for which they are registered under this program.
  - ✓ Recipients under the program are obligated to reimburse the University of Guam for tuition if the student fails to maintain a 3.0 cumulative grade point average.
  - ✓ Benefits are subject to the availability of funding.
- **Special Students:** *A special student is an applicant 18 years of age or older who does not meet the requirements for regular student admission, but wishes to pursue a degree. Students in this category may earn college credit for successfully completed courses, but are not eligible for federal financial aid and may not be considered for graduation unless reclassified to regular student status. Please see the undergraduate catalog for details.*
- **Non-Degree Students:** *An applicant who has not been a full-time secondary student for at least four years and has graduated, or who is enrolled in a degree program at another institution and does not wish to enroll in a degree program at UOG. Please see the undergraduate catalog for details.*



## Frequently Asked Questions

Q. *What do I need to do to apply for Admission?*

- A. Submit the following items to the Admissions Office for a complete application:
- ✓ Application Form (available at the Admissions Office or download at [www.uog.edu](http://www.uog.edu))
  - ✓ \$49 Fee (Please remit to the Business Office, Administration Bldg., on campus)
  - ✓ High School Transcripts (arrange for mailing directly from your school to UOG)
  - ✓ Health Clearance (current immunizations)

Q. *Do I need to take the SAT or ACT for admission? Or earn a certain gpa?*

- A. No. As an open-entry university, completion of twelve years of formal education is the only academic requirement for admission to UOG.

Q. *When is the deadline for admissions?*

<u>Semester:</u>	<u>Deadline</u>	<u>Classes Start</u>
Fall	1 <sup>st</sup> week of June	Mid August
Spring	2 <sup>nd</sup> week of November	Mid January

NOTE: (high school transcripts may be submitted after graduation)

Q. *What's the average cost for full-time enrollment per semester?*

- A. On average, the semester cost of tuition and fees for full-time students is \$3754.

Q. *Is financial assistance available to pay for these costs?*

- A. Definitely! At least 60% of our students qualify for one or more of the many scholarships, grants, and loans available at UOG. Approximately 60% qualify for federal financial assistance.

Q. *What is National Student Exchange ("NSE")?*

- A. After completing one year at UOG, we can arrange for you to attend one or two semesters at another U.S. college. All classes would count towards your degree at UOG, and you would be charged UOG tuition rates. This program is an excellent opportunity to experience college in Hawaii or the U.S. mainland.

Q. *Why should I attend UOG?*

- A. UOG is a world of choices, here at home!



**Please read the following information and review the enclosures before you submit the application and supporting documents.**

## **UNDERGRADUATE ADMISSION INFORMATION AND APPLICATION PROCEDURES**

**Application and Fee:** A completed application along with all required additional documents must be submitted to the Admissions Office at the address above. Failure to include the application fee will result in the rejection of the application. NON-REFUNDABLE PROCESSING FEE can be mailed with the application or paid at the cashier's office, in the administration building on campus (M-F, 8:00 a.m. - 4:00 p.m.) before submitting your application. If mailing in your application, a money order or Cashiers Check are the only acceptable form of payment. Your application fee is valid for one calendar year by semester.

**Deadlines:** Completed application must be received by the published dates included in this application packet. Applications received after the deadlines for admission for a particular term will be considered for the next term. Should you decide not to attend the semester you are applying for, you must submit a written request to the Admissions Office to defer your application to the following semester.

**Transcripts:** First time college applicants are required to have their secondary school or General Educational Development (GED) Institute send a transcript showing completion of twelve years of elementary and secondary education to the Admissions Office. Transfer applicants are required to have their transcripts from all colleges and universities attended sent directly to the Admissions Office at the address above. **Transcripts submitted by the applicant will not be accepted as official. All transcripts become university property and will not be given to or reproduced for the applicant/student.**

**Placement Examinations:** All entering freshmen and transfer applicants who have not completed at least three (3) semester hours of college-level English composition and at least three (3) semester hours of transferable college-level mathematics course with a grade of "C" or better at an accredited U.S. College or University must take placement examinations in English and Mathematics. Applicants who do not take the English placement test or who do not submit transcript showing completion of college level English can be admitted only as transition students and will be limited in their enrollment to certain approved courses for transition students. Admission under this status is limited to one semester.

APPLICATIONS MUST BE PAID AND SUBMITTED TO THE ADMISSIONS OFFICE PRIOR TO PLACEMENT EXAMINATIONS.

**Health Requirement:** All applicants must supply evidence of having been vaccinated against measles, mumps and rubella (MMR) and the results of a tuberculin skin test taken no earlier than six months prior to the beginning of the entry term. In addition, applicants must complete a personal health survey form and submit it to the Student Health Services Office. Health documents must be submitted to Student Health Office and cleared by the nurse before Orientation and Registration. Failure to submit health documents for your health clearance will delay registration.

**Residency Classification:** (See Student Residency Policy)

### **Notice of Availability of the Annual Campus Security and Fire Safety Report:**

The University of Guam's Annual Campus Security and Fire Safety Report includes statistics for the previous three years concerning reported crimes that occurred on-campus; in certain off-campus buildings or property owned or controlled by the University of Guam; and on public property within, or immediately adjacent to and accessible from, the campus. The report also includes institutional policies concerning campus security, such as policies concerning sexual assault, and other matters. You can obtain a copy of this report by contacting the Office of the Vice President of Administration and Finance or by accessing the following web site <http://www.uog.edu/dynamicdata/EMSSHome.aspx?siteid=1&p=42>, click tab on left hand side for "Security and Fire Safety Report".

**Discrimination Prohibited:** No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance, or be treated on the basis of gender, or disability under most education programs or activities receiving Federal Assistance.

# **STUDENT RESIDENCY POLICY**

*As revised by the Board of Regents on April 09, 2012*

*For tuition purposes, students are classified as resident or nonresident. The Registrar certifies the residency status. The considerations used in determining Residency status are as follows:*

- ✓ Establishment of a domicile on Guam or in one of the Freely Associated States (the Commonwealth of the Northern Marianas Islands, the Federated States of Micronesia, the Marshall Islands, or the Republic of Palau) as mandated by 17GC16125. (a) for a period of twelve month prior to the beginning of the term for which residency is claimed, or
- ✓ Evidence of residency for a period of twelve months or more prior to the beginning of the term for which residency is claimed. Evidence of residency will be shown by a student providing documentation from one of the following<sup>1</sup>:
  - Permanent employment on Guam (verification of employment)
  - Payment of income taxes of Guam (by student, or by parent/guardian if the student is a dependent).
  - Ownership or rental of living quarters on Guam.
  - Continue to use a Guam permanent address on ALL RECORDS (educational, employment, military, financial).
  - Retain your Guam voter's registration.
  - Maintain a Guam driver's license or vehicle registration. If it is necessary to change your license or registration while temporarily residing in another location, the license MUST be changed back to Guam within 10 days of the date of return to Guam, and the vehicle registration must be changed within 20 days of the date of return.
  - Village Mayor's certification of residency.
- ✓ Adjustment to Permanent Resident Status Students who have filed for an Adjustment to Permanent Resident Status will be eligible for resident rate **only** if they have resided on Guam for twelve consecutive months prior to applying to the university and have submitted the following supporting documents:
  - A Notice of Action for the Adjustment to Permanent Resident Status from the USCIS.\*
  - Proof of residency (documents to prove living on Guam for the last twelve months prior to applying to the university).

\*A Notice of Action denying the student's application for an Adjustment to Permanent Resident Status will render the student ineligible for resident tuition rate.

The burden of proof is upon the student making a claim to resident student's status. The admission of students who knowingly provide false information for the purpose of achieving resident status shall be subject to cancellation and adjusted billing.

Complete the "Petition for Residency Student Classification" before the deadline of the semester or term you wish to enroll. Approved changes of status will become effective for the term or semester following the approval; they are not retroactive, and no refunds will be given.

## **Exemptions to the twelve-month requirement where resident classification may apply<sup>1</sup>:**

### **Graduate of a Guam High School**

You may be entitled to an exemption from nonresident tuition if you attended high school in Guam for three (3) or more years AND graduated from a Guam high school. You are not eligible for this exemption if you are a nonimmigrant alien.

### **Attended Elementary and Middle School on Guam**

You may be entitled to an exemption from nonresident tuition if you attended both elementary AND middle school on Guam. You are not eligible for this exemption if you are a nonimmigrant alien.

### **Active Military Duty**

United States Military personnel and their authorized dependents (as defined by the Armed Services) during the period such personnel are stationed in Guam on active duty. NOTE: This exception does not apply to employees of other U.S. federal government departments, bureaus, or agencies or their dependents who are assigned or stationed to Guam.

### **Legal Place of Residency**

You may be entitled to an exemption from nonresident tuition if you are able to demonstrate to the Registrar that Guam is your legal place of residency and you intend to make Guam your permanent place of residency.

You may be entitled to an exemption from nonresident tuition if you are able to demonstrate that you permanently reside in Guam, but have been absent for only educational, training, or military reasons.

<sup>1</sup>Non immigrant aliens, e.g. B,F,H,E Visa holders, are classified as non-residents and are not qualified for resident tuition rates or exemptions.



The deadline dates for prospective students, as well as tuition costs, are provided below.

***SCHEDULE OF APPLICATION DEADLINES TUITION COST AND APPLICATION FEES***

**INTERNATIONAL (I-20) FOREIGN UNDERGRADUATE & GRADUATE APPLICANTS**

<u>Entry Term</u>	<u>Application Deadline</u>	<u>Application Fee</u>	<u>Tuition (Per Credit)</u>	
			<u>Undergraduate /Graduate</u>	
Spring 2013	September 04, 2012	\$74.00	\$565.00	\$639.00
Summer 2013	February 04, 2013	\$74.00	\$565.00	\$639.00
Fall 2013	March 18, 2013	\$74.00	\$565.00	\$639.00

**RESIDENT/NON-RESIDENT UNDERGRADUATE AND GRADUATE APPLICANTS**

<u>Entry Term</u>	<u>Application Deadline</u>	<u>Application Fee</u>	<u>Tuition (Per Credit)</u>	
			<i><b>Resident</b></i>	<i><b>Non-Resident</b></i>
			<u>Undergraduate/Graduate</u>	<u>Undergraduate/Graduate</u>
Spring 2013	November 16, 2012	\$49.00	\$190.00    \$258.00	\$565.00    \$639.00
Summer 2013	April 19, 2013	\$49.00	\$190.00    \$258.00	\$565.00    \$639.00
Fall 2013	June 04, 2013	\$49.00	\$190.00    \$258.00	\$565.00    \$639.00

NOTE: All applications received after the schedule deadlines are not guaranteed acceptance. Late Registration fee will be assessed. Application fee and tuition fee are subject to change. Semester fees also apply.

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**PLACEMENT EXAMINATION DATES**

**(Picture ID Required)**

**PROSPECTIVE APPLICANTS MUST SUBMIT AN ADMISSIONS APPLICATION FORM  
BEFORE TAKING THE PLACEMENT EXAMINATIONS**

<u>TERM</u>	<u>DATE/SUBJECT</u>	<u>TIME</u>	<u>LOCATION</u>
Spring 2013	December 01, 2012	08:00 a.m.	CLASS Lecture Hall
Summer 2013	April 20, 2013	08:00 a.m.	CLASS Lecture Hall
Fall 2013	July 11, 2013 (A-C)	08:00 a.m.	CLASS Lecture Hall
Fall 2013	July 11, 2013 (D-L)	12:00 p.m.	CLASS Lecture Hall
Fall 2013	July 12, 2013 (M-Q)	08:00 a.m.	CLASS Lecture Hall
Fall 2013	July 12, 2013 (R-Z)	12:00 p.m.	CLASS Lecture Hall

Please be advised that the placement test dates are subject to change. A reminder will be sent to the student via email the week of the test date.

For more information contact: English Dept. Tel. 735-2725-6 or Fax 734-0012  
Math Dept. Tel. 735-2825 or Fax 734-4582





# UNIVERSITY OF GUAM

## Undergraduate

### APPLICATION FOR ADMISSION

**IMPORTANT:** A non-refundable Application Fee must accompany this application. Certified Cashiers check or money order should be made payable to the University of Guam. Please use a pen (print in ink) or a typewriter in filling out this form and submit the completed application to the Admissions Office. Please provide complete and accurate information in blue or black ink. Incomplete applications cannot be processed and the applicant will not be considered for admission.

LEGAL NAME: LAST, FIRST MIDDLE			ANY OTHER NAMES USED ON OTHER REQUIRED DOCUMENTS:		
MAILING ADDRESS:			NUMBER/STREET		CITY STATE ZIPCODE
HOME ADDRESS:			(Effective Date):		
CONTACT INFORMATION: HOME:			WORK:		CELL: EMAIL:
SEMESTER ENTERING: (Select (1) and indicate semester year) ( ) FALL 20 ( ) SPRING 20 ( ) SUMMER 20					
ADMIT STATUS: (check one)		<input type="checkbox"/> New Freshman		<input type="checkbox"/> New Non-Degree	
		<input type="checkbox"/> To provide a foundation for my career objective		<input type="checkbox"/> Second Baccalaureate Degree	
EDUCATIONAL GOAL: (check one)		<input type="checkbox"/> Bachelors degree from UOG		<input type="checkbox"/> Undecided	
		<input type="checkbox"/> Transfer credits to another institution		<input type="checkbox"/> Other (Specify)	
WHAT MAJOR PROGRAM OF STUDY DO YOU INTEND TO PURSUE?					

(NOTE: Some majors, such as, but not limited to, Education, Nursing, Social Work, have additional admissions requirements before being accepted, please consult the catalog for detail(s) in their programs).

PERSONAL DATA			
DATE OF BIRTH: Month Day Year		PLACE OF BIRTH (State or Foreign Country):	
U.S. SOCIAL SECURITY NO:		FIRST LANGUAGE:	
CITIZENSHIP: (check one)			
<input type="checkbox"/> Guam, USA	<input type="checkbox"/> CNMI – Rota	<input type="checkbox"/> FSM- Chuuk	<input type="checkbox"/> Japan
<input type="checkbox"/> USA, Other	<input type="checkbox"/> CNMI- Other	<input type="checkbox"/> FSM – Yap	<input type="checkbox"/> Korea
<input type="checkbox"/> CNMI – Saipan	<input type="checkbox"/> FSM – Kosrae	<input type="checkbox"/> Palau/Belau	<input type="checkbox"/> Philippines
<input type="checkbox"/> CNMI – Tinian	<input type="checkbox"/> FSM – Pohnpei	<input type="checkbox"/> Marshalls	<input type="checkbox"/> Other
GENDER: ( ) Female ( ) Male MARITAL STATUS: ( ) Single ( ) Married ( ) Divorced ( ) Widowed			
IF YOU ARE A NATURALIZED U.S. CITIZEN, GIVE NATURALIZATION CERTIFICATION NUMBER: _____ (Note: Please present an original copy to the Admissions Office for verification. <b>Do not</b> photo copy the naturalization certificate).			
IF YOU ARE AN ALIEN, PLEASE PROVIDE THE FOLLOWING INFORMATION: Please provide photocopies for the information you have indicated.			
<input type="checkbox"/> Permanent Resident			
<input type="checkbox"/> Non-Resident Alien : I. Type of VISA _____			
II. Visa Number _____			
III. Passport expiration date _____			
IV. Resident of: _____			
ETHNICITY: (check one)			
<input type="checkbox"/> IN – American Indian/Alaskan Native	<input type="checkbox"/> AK – Asian - Korean	<input type="checkbox"/> MM – Micronesia- Marshallese	
<input type="checkbox"/> BN – Black Non-Hispanic	<input type="checkbox"/> AV – Asian Vietnamese	<input type="checkbox"/> MP – Micronesia – Palauan	
<input type="checkbox"/> WN – Caucasian (White) Non-Hispanic	<input type="checkbox"/> AO – Asian –Other	<input type="checkbox"/> MH – Micronesia – Pohnpean	
<input type="checkbox"/> HP – Hispanic	<input type="checkbox"/> CH – Chamorro – Guam	<input type="checkbox"/> MY – Micronesia – Yapese	
<input type="checkbox"/> AC – Asian - Chinese	<input type="checkbox"/> CC – Chamorro-Saipan, Rota, Tinian	<input type="checkbox"/> MO – Micronesia – Other	
<input type="checkbox"/> AF – Asian - Filipino	<input type="checkbox"/> MC – Micronesia – Chuukese	<input type="checkbox"/> PO – Pacific – Other	
<input type="checkbox"/> AN – Asian –Indian	<input type="checkbox"/> MA – Micronesia – Carolinian	<input type="checkbox"/> OT Other: _____	
<input type="checkbox"/> AJ – Asian – Japanese	<input type="checkbox"/> MK – Micronesia – Kosraen		

**PARENT, GUARDIAN, SPOUSE, OR PERSON TO CONTACT IN CASE OF EMERGENCY:**

FULL NAME:

RELATIONSHIP:

MAILING ADDRESS:

HOME PHONE:

WORK PHONE:

CELL:

DATE OF BIRTH:

EMAIL:

**APPLICANT'S EDUCATIONAL DATA**

INDICATE THE NUMBER OF YEARS YOU ATTENDED EACH OF THE FOLLOWING

Elementary School \_\_\_\_\_

Senior High School \_\_\_\_\_

Junior High/Middle School \_\_\_\_\_

College/University \_\_\_\_\_ Total: \_\_\_\_\_

An applicant who has successfully completed twelve (12) year of formal education or who has passed the General Educational Development (GED) Test with a cumulative score of 45 or higher will be considered for admission. Foreign transcript records must be translated into English. We will not accept transcripts submitted by students; academic records must be mailed directly to the Admissions and Records Office from the issuing institutions.

**HIGH SCHOOL(S) ATTENDED**

NAME AND LOCATION (please print full name &amp; location)

DATES ATTENDED

DATE GRADUATED

TO

TO

**GENERAL EDUCATION DEVELOPMENT (G.E.D. , if applicable)**

NAME AND LOCATION (please print full name &amp; location)

DATE PASSED

**UNIVERSITY/COLLEGE ATTENDED**

NAME AND LOCATION (please print full name &amp; location)

DATES ATTENDED

MAJOR

DEGREE &amp; DATE (M/YY) EARNED

TO

TO

TO

TO

TO

To

**Are you in good academic standing at all previous institutions attended and eligible to return? ( ) Yes ( ) No**

Failure to list all institutions previously attended may result in cancellation of your admission. Your application will not be considered complete until we have received official transcripts of all previous academic work sent directly from your previous colleges and universities to the Office of Undergraduate Admissions. If your cumulative GPA at the last institution attended is below the required minimum of 2.00, you may submit a written appeal to the Registrar for consideration of probation admittance to the University of Guam.

If you have ever been on PROBATION or SUSPENDED or DISMISSED by another institution, give the type and date of action taken and indicate your present status.

INSTITUTION

TYPE

DATE

PRESENT STATUS



**RELEASE OF ALL RIGHTS PHOTOGRAPH**

I authorize the University of Guam, and those acting under its authority, to use for any lawful purposes whatsoever, photographic portraits or pictures of myself, or in which I may be included in whole or in part, or composite of distorted in character, or form, in conjunction with my own name, or reproductions thereof in color or otherwise, made through any medium.

Signature

Date

**STUDENT RESIDENCY CLASSIFICATION****RESIDENCY:** (Select one)

- |   |   |                                      |
|---|---|--------------------------------------|
| <input type="checkbox"/> U.S. Citizen & Resident of Guam    | <input type="checkbox"/> CNMI                       | <input type="checkbox"/> FSM         |
| <input type="checkbox"/> U.S. Citizen & Nonresident of Guam | <input type="checkbox"/> I-20 Student               | <input type="checkbox"/> Marshall    |
| <input type="checkbox"/> Guam Resident & Non U.S. Citizen   | <input type="checkbox"/> Active Military /Dependent | <input type="checkbox"/> Palau/Belau |

**NOTE:** A petition and all required supportive document must be filed on or before the established deadline of the semester or summer term for which you seek Resident Student classification. No petition will be considered unless it is accompanied by the supporting documents.

- I am a resident of state/country \_\_\_\_\_
- Have you lived on Guam continuously since birth? ( ) YES ( ) NO If not, please answer the remaining questions.
- When did you last arrive on Guam? Give month, date and year of arrival: \_\_\_\_\_
- If Guam is your legal residence, give exact month, day and year residence was established: \_\_\_\_\_
- What was your reason for coming to Guam? \_\_\_\_\_
- Check the type of supporting document to be submitted:  
☐ Guam High School Transcript  
☐ Other \_\_\_\_\_

*Nonimmigrant aliens, e.g., B,F,H, and E visa holders, are classified as non-residents and are not qualified for resident tuition rates or exemptions.*

Please refer to application instruction booklet for eligibility requirements.

**FOR ACTIVE MEMBERS OR VETERANS OF U.S. ARMED FORCES**

( ) I am now in the U.S. \_\_\_\_\_ on full-time duty at \_\_\_\_\_  
BRANCH OF SERVICE BASE OR STATION

( ) I am a veteran of the U.S. Armed Forces. I received a discharge other than dishonorable from the U.S. \_\_\_\_\_  
BRANCH OF SERVICE

**FOR STATISTICAL REPORTING (optional)**

**DOES AT LEAST ONE OF YOUR PARENTS OR LEGAL GUARDIANS HAVE A BACHELOR'S DEGREE?** ( ) YES ( ) NO

**ARE YOU FROM A LOW-INCOME HOUSEHOLD?** (for statistical reporting only) ( ) YES ( ) NO

**WHICH ACADEMIC SUPPORT SERVICES WOULD YOU BE INTERESTED IN?:** (check all that apply)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Tutorial Services    | <input type="checkbox"/> Peer Counseling | <input type="checkbox"/> Financial Aid Assistance |
| <input type="checkbox"/> Freshmen Orientation | <input type="checkbox"/> Computer Access | <input type="checkbox"/> Cultural Orientation     |

**DID YOU TAKE THE UOG ENGLISH AND MATH PLACEMENT EXAMINATIONS?** ( ) YES WHEN: \_\_\_\_\_ WHERE: \_\_\_\_\_ ( ) NO

**DO YOU HAVE A PHYSICAL OR LEARNING DISABILITY?** (For statistical reporting only) ( ) Yes ( ) No

If you are a person with a disability and in need of assistance, please call The ADA Office at (671) 735-2244, 735-2971, (Voice) TTY for support services and information.

## RELEASE OF INFORMATION

The University of Guam complies with the statutes and regulations of the Family Educational Rights and Privacy Act of 1974 pertaining to the confidentiality of a student's personal and academic records in its possession. See catalog for more information and notice.

The University of Guam is authorized under the provisions of the Family Educational Rights and Privacy Act of 1974 to release student directory information. Directory information includes the student's name, address, email address, telephone listing, date and place of birth, major field of study, gender, load status, class levels, participation in officially recognized activities and sport, weight and height of members of athletic teams, dates of attendance, degrees and awards received, and the most recent previous educational agency or institution attended by the student. The above-designated information is subject to release by the University of Guam at any time unless it has received prior written objections from the student specifying information, which the student requests not to be released.

Students wishing to restrict release of directory information must file a "Request to Prevent Disclosure of Directory Information" form at the Office of Admissions and Records. This form must be filed within two weeks after the first day of instruction of the regular semester and within one week after the first day of instruction of the summer session. The notification to prevent disclosure of directory information is effective only for the one term from which the student is registered.

=====Optional=====

I authorize the following individual(s) full access to my student records, to include but not limited to, transcript requests, grades, enrollment certification, and registration. I understand that I may cancel this authorization at anytime.

NAME (please print)	RELATIONSHIP	DATE OF BIRTH

I certify that the statements I have made in this application are true and correct. I understand that any false information found to have been willfully given by me herein or in any supporting document should be cause for rejection of my application or for my immediate dismissal.

\_\_\_\_\_  
**APPLICANT'S SIGNATURE**

\_\_\_\_\_  
**DATE**

**THE FOLLOWING INFORMATION IS NEEDED BEFORE YOUR APPLICATION STATUS TO THE UNIVERSITY OF GUAM CAN BE DETERMINED:**

\_\_\_\_\_ Official Preliminary High School Transcript (*High School Seniors*)

\_\_\_\_\_ Official Documentation of GED Scores

\_\_\_\_\_ Official High School Transcript indicating graduation date

\_\_\_\_\_ Official Statement of Standing (*if transfer non-degree student*)

\_\_\_\_\_ Official College Transcript(s)

\_\_\_\_\_ Proof of Residency

\_\_\_\_\_ Student Health Clearance (*shot records*)

\_\_\_\_\_ Other

I understand that I need to submit the document(s) indicated above in order to complete my application. This may delay my acceptance to the University or registration for my classes.

\_\_\_\_\_  
**Student** (print and sign)

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**A & R Technician**

\_\_\_\_\_  
**Date**

**DO NOT WRITE ON THIS SPACE BELOW**

**RECRUITMENT EVENT:**

- ☐ High School
- ☐ Website
- ☐ Walk-In

- ☐ Recruitment Event (Off-Campus)
- ☐ Recruitment Event (On-Campus)
- ☐ Other (Specify):

APPLICATION RECEIVED ON: \_\_\_\_\_

BY: \_\_\_\_\_

*Date*

*Receiving person*

ADMISSIONS STATUS: ( ) Regular Student ( ) High School Student ( ) Special Student ( ) Application Rejected

APPLICATION FEE RECEIVED: \_\_\_\_\_

RECEIPT NO: \_\_\_\_\_ ( ) LATE

REASON (S) FOR REJECTION (*if applicable*) \_\_\_\_\_



UNIVERSITY OF GUAM  
UNIBETSEDĀT GUAHAN

Enrollment Management & Student Services  
Admissions and Records

The following information is needed before your application status to the University of Guam can be determined:

(to be checked off by our office staff)

- ☐ Official Preliminary High School Transcript (*High School Seniors*)
- ☐ Official High School Transcript Indicating Graduation Date
- ☐ Official Documentation of GED Scores
- ☐ Official Statement of Standing (if transfer non-degree student)
- ☐ Official College Transcript(s)
- ☐ Student Health Clearance (shot records)
- ☐ Proof of Residency
- ☐ Other: \_\_\_\_\_

I understand that I need to submit the document(s) indicated above in order to complete my application. This may delay my acceptance to the university or registration for my classes.

\_\_\_\_\_  
**Student (print name)**

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**A & R TECH**

\_\_\_\_\_  
**DATE**

## NOTES



**UNIVERSITY OF GUAM**  
STUDENT HEALTH SERVICE  
UOG STATION MANGILAO, GUAM 96923  
TEL: 735-2226 • FAX: 734--4651  
**REPORT OF MEDICAL HISTORY**

TO THE STUDENT: The University of Guam requires that each student submit a medical history. Students' health records are for the use of the Student Health Service and will not be released or disclosed to anyone without the student's knowledge or permission. The University of Guam does not discriminate on the basis of handicap in the recruitment and admission of students or the operators of any of its programs and activities, as specified by federal laws and regulations. The designated coordinator for University compliance with Section 504 of the Rehabilitation Act of 1973 is the Registrar. This information is treated confidentially and does not become part of your academic records. Please type or print answers in English. If you have enrolled within the past 4 years at the University of Guam and have previously submitted a health form, you need not complete this form again. (Please use **BLACK** or **BLUE** ink)

STUDENTS NAME: \_\_\_\_\_ SEX: \_\_\_\_\_ MARITAL STATUS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

**FAMILY HISTORY**

Family Member	Age	State of Health	Age at Death	Cause of Death
FATHER				
MOTHER				
BROTHERS				
SISTERS				

COLLEGE/UNIVERSITY ATTENDED	DATES
Name at previous enrollment at UOG (if different from above).	
<b>IN CASE OF EMERGENCY NOTIFY:</b>	
NAME	
Last	First Relationship
ADDRESS	
Street	City
TELEPHONE ( )	
State	Zip Code Area code

**PERSONAL HISTORY**

Please indicate YES or NO in all questions. Make appropriate comments in the space provided below or on a separate sheet of paper.

Have you had...	Yes	No	Have you EVER had...	Yes	No	Do you FREQUENTLY have...	Yes	No
SCRALET FEVER			PAIN IN THE CHEST			INSOMNIA (CAN'T SLEEP)		
RHEUMATIC FEVER			SHORTNESS OF BREATH			ANXIETY, WORRY		
MEASLES			ASTHMA			DEPRESSION		
GERMAN MEASLES			HAY FEVER			NERVOUSNESS		
MUMPS			ALLERGY			STOMACH TROUBLE		
CHICKEN POX			TUBERCULOSIS			DIARRHEA		
MALARIA			TUMOR OR CANCER			DIZZINESS, FAINTNESS		
VENEREAL DISEASE						PALPITATION		
RECENT GAIN/WEIGHT LOSS						HEADACHES		
ANY SURGERY						COLDS, SORE THROAT		
Have you had any illness or injury or been hospitalized other than already noted? (Give details)			Have you ever received treatment for a nervous condition or mental condition or mental/emotional problem? (Give details)			Has your physical activity been restricted?		

**NOTE:** Information regarding handicaps, voluntarily given or inadvertently received, will not adversely affect any admissions decision. If you should require special services because of your disability, you may notify the University Health Nurse or Vice President, Student Affairs. This voluntary self-identification allows the University of Guam to prepare appropriate support services to facilitate your learning. This information will be kept in strict confidence and has no effect on your admission to the University of Guam.

(OPTIONAL) Please check the appropriate box:

☐ Blind ☐ Deaf ☐ Paraplegic ☐ Quadraplegic ☐ Developmental Handicap ☐ Speech Impediment ☐ Other

Thank you for taking time out in helping us help you. Please contact the University Nurse upon arrival on campus.

SEE REVERSE SIDE

STUDENT'S SIGNATURE

DATE



**UNIVERSITY OF GUAM**  
STUDENT HEALTH SERVICE  
UOG STATION MANGILAO, GUAM 96923

*The University of Guam requires all newly entering students to be immunized against MEASLES and RUBELLA (GERMAN MEASLES). This medical requirement will be strictly monitored and enforced due to the increasing occurrence of measles in adults throughout the Pacific and United States. It is recommended that these immunizations be administered before coming on campus. (Please use BLACK or BLUE ink)*

STUDENT'S NAME: \_\_\_\_\_  
LAST FIRST MIDDLE

SOCIAL SECURITY NO: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

**PLEASE CHECK:**

NEW STUDENT: \_\_\_\_\_

RE-ENTRY: \_\_\_\_\_

GRADUATE SCHOOL: \_\_\_\_\_

**IMMUNIZATIONS**

**REQUIRED:** Date of Last Immunization

	# 1	# 2
Measles	(\$) _____	_____
Mumps	(\$) _____	_____ (\$ BORN IN OR AFTER 1957)
Rubella	(\$) _____	_____

Last Attendance	New Attendance
SPRING: _____	SPRING: _____
SUMMER: _____	SUMMER: _____
FALL: _____	FALL: _____

PPD Date Given \_\_\_\_\_ Date Read \_\_\_\_\_ Results(mm) \_\_\_\_\_

X-Ray (if PPD +) Date \_\_\_\_\_ Results \_\_\_\_\_

ELI \_\_\_\_\_  
NSE \_\_\_\_\_  
INTERNATIONAL \_\_\_\_\_

**RECOMMENDED:**

Polio

Diphtheria

Tetanus

- This requirement is to be waived if: 1) the individual was born before 1957 (when we can assume that the individual probably had measles as a child or 2) A physician has documented the diagnosis of measles in the past or 3) Serologic evidence of immunity can be presented.
- Dates of immunizations must be indicated and signed by provider or immunization record submitted with Medical History Form.
- All corrections made must be initialed by provider (no-white-outs accepted).
- Students must show valid documentation of TB skin test result conducted within six (6) months prior to entry into the University of Guam.

**COMMENTS:**

Signature of Health Provider \_\_\_\_\_ Date \_\_\_\_\_

Name of (PRINT) \_\_\_\_\_

Address \_\_\_\_\_

UNIVERSITY OF GUAM  
UNIBETSEDAT GUAHAN  
ENROLLMENT MANAGEMENT & STUDENT SERVICES  
OFFICE OF ADMISSIONS AND RECORDS  
UOG Station, Mangilao, Guam 96923  
Phone: (671) 735-2201-2 Fax: (671) 735-2203  
e-mail: [admitme@uguam.uog.edu](mailto:admitme@uguam.uog.edu) website: [www.uog.edu](http://www.uog.edu)

**REQUEST FOR TRANSCRIPT: HIGH SCHOOL/COLLEGE/UNIVERSITY**

*It is the applicant's responsibility to mail this form to the appropriate high school, college or university previously attended. We will not accept transcripts submitted by students; academic records must be mailed directly to the Admissions and Records Office from the issuing institution.*

**TO THE REGISTRAR/RECORDS CLERK:**

\_\_\_\_\_  
**COMPLETE NAME OF HIGH SCHOOL/COLLEGE/UNIVERSITY**

\_\_\_\_\_  
**STREET ADDRESS**

\_\_\_\_\_  
**CITY**

\_\_\_\_\_  
**STATE**

\_\_\_\_\_  
**ZIP CODE**

**Please Send:**    ☐ **High School record (showing date of graduation or withdrawal)**  
                  ☐ **College/University transcript**

<b>NAME</b> ( <i>Type or print last name first</i> )	<b>DATE OF BIRTH</b>
<b>MAIDEN NAME</b> ( <i>If applicable</i> )	<b>PLACE OF BIRTH</b>
<b>MAILING ADDRESS</b>	<b>LAST TERM ATTENDED</b> ( <i>Year</i> )
<b>SOCIAL SECURITY NO.</b>	<b>DATE OF GRADUATION</b> ( <i>If applicable</i> )

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**(PLEASE DETACH AND RETURN TO THE UNIVERSITY OF GUAM)**

**TO THE REGISTRAR, UNIVERSITY OF GUAM**

**SUBJECT: TRANSCRIPT REQUEST OF:** \_\_\_\_\_  
**NAME OF STUDENT**

☐ **The transcript of the above named student is enclosed.**

☐ **There is no record of the above named student at this college or university.**

☐ **The transcript of the above named student cannot be released for the following reasons(s):**

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**SCHOOL/COLLEGE/UNIVERSITY**