

Pacific Islands University

Application Procedure

Re-Entry Application for All Programs

After a voluntary absence of greater than one year from PIU you must complete the following application.

- A. Procedure for materials which **you should send** to PIU:
(Incomplete forms will result in delay of your application process)
1. Complete the Re-Entry Application for Admission.
 2. Read and sign the Standards of Behavior form.
 3. Health Report from your doctor.
 4. **Undergraduate** students must provide an official report of a recent TOEFL exam if you have not successfully passed Freshman English 1 and 2. TOEFL requirements for **Graduate** students are decided on a case-by-case basis.
 5. Send all of these to:

Pacific Islands University
Registrar
P.O. Box 22619
Barrigada, Guam 96921
USA

For questions please contact PIU at 671-734-1812 or by e-mail at admissions@piu.edu.



Application for Admission For Re-Entry Students

Pacific Islands University
Registrar
P.O. Box 22619
Barrigada, Guam 96921

Introductory Information

Date: _____

Application for:

- Fall Semester Spring Semester Summer Semester

Location: Guam Campus Other: _____ (please enter location)

Name: _____ Social Sec. Number: _____
Last First Middle

Mailing address: _____
Address City/Island State Zip code

Telephone: _____ E-mail address: _____

Date of birth: _____ Place of birth: _____ Male Female
Month Day Year

Country of Citizenship: _____ Home Island: _____

- Ethnicity: Chinese Filipino Japanese Korean
 Chamorro Chuukese Kosraean Marshallese
 Palauan Pohnpeian Yapese African American
 Caucasian Other _____

US Immigration Status: _____ Resident Alien Card #: _____

Marital Status: Single Married Other _____

Name of Spouse: _____ Number of Children: _____

Name and address of your church: _____
Church Name City/Island Phone

Please list in chronological order your activities since attending PIU/PIBC including other schools attend, employment, military service, etc.

Activity	Date Begun	Date Ended	Full-time/Part-time
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please answer the following questions completely and honestly.
Why did you leave PIU/PIBC (or decide not to re-enroll) previously?

Have you every been dismissed or placed on probation? Yes No
If yes, please explain the circumstances.

If yes, please explain in what ways your outlook, purposes, and/or circumstances have changed since that time.

Why do you wish to re-enroll at PIU at this time?

Indicate the program of study you anticipate to re-enter at PIU:

- Certificate in Biblical Studies
- Diploma in Biblical Studies
- A. A. Degree in Biblical Studies
- A. A. Degree in Liberal Arts
- B. A. Degree in Biblical Studies
- B. A. Degree in Liberal Studies
- Masters of Arts in Religion

OR

Indicate which non-program course of study you want to re-enter at PIU:

- Audit PIU class - \$150 per course
- Certificate in Basic English (CBE) – all course fees apply (scholarships may be available)

Where do you expect to live while studying at PIU?

- I will live at home and commute to school. I need a room in the dorm.

How do you plan to pay PIU expenses?

- Self support Family support Church support other:

(Please explain) _____

I am enclosing with this application form my a signed Standards of Behavior form and my payment of

Signature: _____



Pacific Islands University

STANDARDS OF BEHAVIOR FOR PIU STUDENTS

Personal spiritual growth is a basic purpose of PIU. The faith, attitudes and behavior of all members of the PIU family need to grow more like Christ inside and outside the classroom. This means that each individual at PIU must agree to accept the Word of God as authority and humbly submit in heart, mind and life to our Master, Jesus Christ.

In addition, it is important to learn to live in a community. God calls staff and students from different cultural and church backgrounds. This complicates daily life on PIU campus, for Christians are not in agreement about some aspects of Christian life. The Board of PIU has carefully considered cultural and ecclesiastical concerns and agreed upon some standards of behavior for PIU students and staff members. For the sake of maintaining a healthy campus community, PIU specifically prohibits the possession and use of tobacco, illegal drugs, alcohol, and betel nut on school property or at school sponsored activities. Furthermore, PIU expects students to live lives that are consistent with biblical principles. We understand drunkenness, sexual immorality, gossip, slander, profanity, ethnic or cultural discrimination, dishonesty, stealing, plagiarism, etc. to be inconsistent with biblical living. We expect all PIU students to be active participants in the life of a local church and to strive for academic excellence. PIU will attempt to deal with these issues firmly and redemptively. These and other important standards are described further in the Student Handbook and must be followed by each student.

When necessary, there is a policy for rebuke and discipline, also described in the Student Handbook. Any discipline will be based on scriptural principles with the purpose of correcting the quality of our relationships with Christ and with one another. The key to all of this is Christian love, which compels us to submit to God and to one another.

I agree to submit to PIU rules, standards and authorities as long as I am enrolled by the school.

Signature

Print Name

Date



Health Report

Pacific Islands University
 Registrar
 P.O. Box 22619
 Barrigada, Guam 96921
 Tel: 671-734-1812, Fax: 671-734-1813
 E-mail: admissions@piu.edu

To the Applicant: PIU requires that each student submit a medical history. Student's health records are for the use of the school, and will not be released or disclosed to anyone without the student's knowledge or permission. This information is treated confidentially and does not become part of your academic records.

I. To be completed by Applicant:

Name of Applicant: _____
Last First Middle

Date of Birth: _____ Male Female

In Case of Emergency Notify: _____
Name Phone

Address

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
Scarlet 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 Weight Gain/Loss						Headaches		
Any Surgery						Colds, Sore Throat		
Any illness or injury or been hospitalized other than already noted? (Give details)			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.

Details:

II. To be completed by Medical Provider

Height _____ Weight _____ Blood Pressure _____

Vision: Right Eye _____ Left Eye _____

Hearing: Right Ear _____ Left Ear _____

Is the Applicant currently on any medication? Yes No

If yes, please list medications and reasons _____

In your judgment, is the applicant physically and mentally fit for intensive, continuous study on a college level and to participate in a Physical Education program? Yes No

If no, please explain _____

Pacific Islands University 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 the United States. It is recommended that these immunizations be administered before coming on campus. We also require up-to-date DPT and Polio immunizations.

IMMUNIZATIONS

Please insert date of last immunization:

	#1	#2	#3	#4	#5
A. MMR					
B. Polio					
C. DPT					
D. Hep. B (Optional)					

PPD Date Given: _____ Date Read: _____ Results: (mm) _____

If PPD Test is positive, please see attached Form!

★ Student must show valid documentation of tuberculin skin test result conducted within six months prior to entry into PIU.

Comments:

Signature of Provider Date

Name and Title (Print)

Address

III. TB Clearance (Only needed if PPD Test is positive)

Name of Applicant: _____
Last First Middle

Date of initial PPD skin test: _____ Result: _____

Date of latest PPD skin test: _____ Date read: _____ Result: _____

Date of Chest x-ray: _____ Date read: _____ Result: _____

Is Tuberculin (Mantoux) skin test positive? Yes No

A recent contact to an active TB person? Yes No

Is the person Symptomatic? Yes No

Sputum smear _____ Sputum Culture _____

Chemoprophylaxis? None 6 months 9 months 12 months

▪ Types of drugs (Preventive Treatment) taken and dose: _____

▪ Date started Preventive Treatment: _____

▪ Date Preventive Treatment completed: _____

▪ On preventive treatment now? Yes No

Chest x-ray Suggestive of Tuberculosis? Yes No

Previous Diagnose of Tuberculosis? Yes No

Pulmonary Tuberculosis? Yes No

Extrapulmonary Tuberculosis? Yes No

On TB treatment for: 6 months 12 months D.O.T.? Yes No

Types and doses of TB drugs taken: _____

Date TB treatment completed: _____

Comments:

Signature of Physician Date

Name and Title (Print)