



Anaheim University Admissions Application

Office of Admissions • 1240 S. State College Blvd. Room #110 • Anaheim, CA 92806 USA

Tel: 714-772-3330

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E-mail: admissions@anaheim.edu

Website: http://www.anaheim.edu

please attach photo here

Personal Data

Full Legal Name: Last		First		Middle Initial	
Gender (For statistical purposes only) <input type="checkbox"/> Male <input type="checkbox"/> Female		Date of Birth Month / Day / Year		U.S. Social Security # (if applicable)	
Country of Citizenship		TOEFL iBT Score		TOEFL Score (Paper)	
TOEFL Score (Computer Based)		TOEIC Score		IELTS Score	
Native Language		Home Telephone Number		Work Telephone Number	
Fax Number <input type="checkbox"/> Home <input type="checkbox"/> Office		Cell phone Number			
Mailing Address: Street Address/Apt.#				Email Address	
City		State / Province / Prefecture		Zip/Postal Code	
Country					

Professional Background

Current Employer Name		Occupation/Job Title		Employment Duration	
Employer Address Street Address		Is your employer a Global Learning Partner? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know			
City		State / Province / Prefecture		Zip/Postal Code	
Country					

Academic Background

Last Educational Institution Attended		Location	Years Attended	Subject Area	Qualification/Degree Obtained
Previously Attended Educational Institution		Location	Years Attended	Subject Area	Qualification/Degree Obtained

Enrollment Information

Program for which you are Seeking Acceptance		Desired Start Date	Course #(s) of first course(s)
<input type="checkbox"/> MBA Professional track (Tokyo Ctr only) <input type="checkbox"/> MBA Online Global track <input type="checkbox"/> MBA Sustainable Mgmt track <input type="checkbox"/> Diploma in Sustainable Mgmt <input type="checkbox"/> Certificate in Sustainable Mgmt <input type="checkbox"/> MA in TESOL <input type="checkbox"/> TESOL Certificate		Do you have any courses you wish to be considered for transfer credit? (Master's degree and diploma programs only) Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please give name of course(s):	

Anaheim University and Disability Accommodations

Anaheim University will make reasonable provision for students with learning or other disabilities. Do you have a disability you would like the University to accommodate? YES NO If yes, please provide documentation and detail how your disability can best be accommodated.

Important Notice regarding the Family, Educational Rights and Privacy Act: In accordance with the Family, Educational Rights and Privacy Act of 1974 (section 438 of Public Law 93-380). Information in these records may not be released to a third party without the written consent of the student.

This is to certify that all of the information presented in this application is true and correct at this time and that I will send timely notice to the University of any significant change in the information presented herein. I understand that this is an application for enrollment and that the University does not guarantee my acceptance into any Anaheim University program. I have read and fully understand all Anaheim University policies and procedures. I also understand that the University reserves the right to change admission standards, tuition fees, graduation requirements, and any and all academic and administrative policies or course schedules during my term of study.

Signature

Date (Month / Day / Year)

OFFICE USE ONLY

Application Fee Rec.		Date	Receipt Date	AU
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Personal Data

Name as it appears on your card:		Last	First	Middle Initial
Home Telephone Number	Work Telephone Number	Fax Number	<input type="checkbox"/> Home <input type="checkbox"/> Office	Email Address
Mailing Address: Street Address/Apt.#				
City	State / Province / Prefecture	Zip/Postal Code	Country	

Payment Information

Please check the type of credit card you would like to use for payment.

Amount	<input type="checkbox"/> VISA Card Number	Security Code □ □ □	<input type="checkbox"/> MasterCard Card Number	Security Code □ □ □
Card Expiration Date Month Year	<input type="checkbox"/> American Express Card Number	Security Code □ □ □ □	<input type="checkbox"/> Discover Card Number	Security Code □ □ □

I hereby authorize Anaheim University to charge my credit card the amount written above.

Signature

Date (mm/dd/yy)

For payment by check, please make check payable to Anaheim University and attach here (no tape or staples, please):