



I am applying for: Spring 200__ (1st Due Date Oct 1; 2nd Due Date Dec 1) Fall 200__ (1st Due Date May 1; 2nd Due Date July 1)

I am applying for admission to: Santa Cruz Campus
 San Jose Campus Day Program San Jose Campus Evening Program San Jose Bilingual Program

Personal Data



Legal Name (Last, First, Middle Initial)

Name on previous academic record, if different from above (Last, First, Middle Initial)

Present Address—Street

City State Zip

Permanent Address—Street

City State Zip

Home Phone Work Phone Cell Phone

Email Social Security # Date of Birth (MM/DD/YY)

Student Type (check all that apply)

- U.S. Resident International TCM Transfer Non-degree seeking

U.S. Citizens only: the US Government asks us to report on the ethnic composition of our student enrollment

- American Indian, Alaskan Native Hispanic Black Non-Hispanic
- White Non-Hispanic Asian or Pacific Islander Other _____

Gender: Female Male

International Students

Citizenship Country of Birth

Do you need a student visa? Yes No

If currently in the US, what type of visa do you hold?

Do you speak English fluently? Yes No

List other languages spoken

TOEFL Yes No Score: _____ Date: _____

TSE Yes No Score: _____ Date: _____

Education Attach additional pages as necessary

College/University Degrees

Address Dates attended

College/University Degrees

Address Dates attended

Experience Please include a resume—attach additional pages as necessary

Present Occupation: _____ From: _____ To: _____

Previous Occupation: _____ From: _____ To: _____

Previous Occupation: _____ From: _____ To: _____

Do you have any work experience in the healthcare profession? Yes No If yes, please describe job(s) and training:

Describe your personal interests other than occupational:

Legal Information

Have you ever been convicted of a felony? Yes No

If yes, please note: The California Acupuncture Board has specific policies regarding applicants who have criminal records. Anyone who has questions regarding these policies should contact the Acupuncture Board at (916) 263-2680.

Financial Data

How do you expect to pay tuition?

You have access to tuition for: 1 semester 1 year 2 years 3 years 4 years

If your tuition is derived from sources other than your own savings or employment, please complete the following:

Person(s) or Agency paying tuition _____ Relationship _____

Address—Street _____ Phone _____

City _____ State _____ Zip _____

In Case of Emergency, Notify

Name _____ Relationship _____

Address—Street _____ Phone _____

City _____ State _____ Zip _____

I hereby certify that all of the information provided in my application package is accurate and true, and that I am the author of the attached Statement of Purpose.

Applicant's Signature _____ Date _____

How did you first hear about Five Branches University?

Santa Cruz Campus
200 Seventh Avenue, Santa Cruz, CA 95062 USA
(831) 476-9424 ■ Fax: (831) 476-8928
admissions@fivebranches.edu

San Jose Campus
3031 Tisch Way, Suite 507, San Jose, CA 95128 USA
(408) 260-0208 ■ Fax: (408) 261-3166
admissions@fivebranches.edu