

Hubbard College of Administration International

320 North Vermont Ave, Los Angeles, California 90004

Phone: 323-660-8685 Fax: 323-912-1984

Application for Admission to Continuing Education Certificate Programs or Courses

(Legal Last Name) (First Name) (Middle Initial)

Permanent Address (Foreign students must fill in foreign address)

Street

City

State Zip

Local Address (if different from permanent address).

Street

City

State Zip

Personal Information

Home Phone # Work Phone # Cell Phone #

e-mail US Drivers License # State Issued:

Date of Birth Country of Birth US Social Security #

Married _____ Single _____ Divorced _____ Separated _____ Widowed _____ Sex: Female _____ Male _____

Number of Children _____ U.S.A. Veteran Yes _____ No _____

U.S. Citizen Yes _____ No _____ Permanent Resident Yes _____ No _____ Country of Citizenship _____

Non Immigrant Student Visa Applicant _____ Visa Yes _____ No _____

Transportation

Public _____ Car _____ Walk _____

Education

High School Diploma Yes _____ No _____

Name of School _____

College/University 1 _____ 2 _____ 3 _____ 4 _____

Degree _____

Graduate/Professional 1 _____ 2 _____ 3 _____ 4 _____ Degree _____

Special Skills

If you did not graduate from high school, do you have a GED? Yes _____ No _____

Have you ever used financial aid for educational purposes? Yes _____ No _____

Employment

Employer _____ Address _____

Length of Service _____ Hours _____

Work Performed _____

What do you hope to achieve in your studies of management and/or administration?

**Do you have any practical experience in management or administration?
If yes, describe:**

What other schools have you investigated?

**Have you ever applied for or received financial assistance?
Explain:**

Who do you look to for support in making this decision?

____ Employer ____ Parents ____ Spouse ____ Other

What obstacles, if any, could stand in the way of your attending Hubbard College of Administration International if you should be accepted?

____ Transportation ____ Available Hours ____ Child care
____ Vacation Interruption ____ Prior Commitment ____ Parent/Spouse Support
____ Other (Please Explain)

What are your goals that Hubbard College of Administration International can help you achieve?

Notes:

All applicants must sign here

I certify that the information contained on this form is accurate and true. I understand that all materials pertaining to my application become the property of Hubbard College of Administration. I agree to abide by the rules and regulations of Hubbard College of Administration International and to meet all financial obligations.

Signature

Date

Reminder: Be sure to photo copy this form before mailing. Please send this form to Hubbard College of Administration International.

Note: Changes are effected from time to time in the general regulations and in the academic requirements. There are, of course, established procedures for making such changes which protect the individual student's interests and the integrity of the school. A curriculum or graduation requirement, when altered, is not made retroactive unless the alteration is to the student's advantage and can be accomplished within the span of time normally required for graduation.

Hubbard College of Administration International admits students of any race, color, creed, sex, handicap, national and ethnic origin to all rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, creed, sex, handicap, national, or ethnic origin in administration of its educational policies, admission policies or other school administrative programs.