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**APPLICATION FOR ADMISSION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Hm. Phone: \_\_\_\_\_ Wk. Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**DEGREES**

\_\_\_\_ M.A. Degree

\_\_\_\_ Doctorate Degree

\_\_\_\_ M.A./Ph.D. Degree

**ACADEMIC PROGRAMS: (please check one)**

\_\_\_\_ Consciousness Studies

\_\_\_\_ Professional Coaching and Human Development

\_\_\_\_ Expressive Arts Therapy

\_\_\_\_ Holistic Psychology

\_\_\_\_ Integrated Health Sciences

\_\_\_\_ Organizational Development & Transformation

\_\_\_\_ Transformational Education

\_\_\_\_ Transpersonal Psychology

\_\_\_\_ Spiritual and Somatic Psychology

\_\_\_\_ Counseling Psychology

The International University of Professional Studies admits students of any race, color, nationality and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on any basis in administration of its scholarship and loan programs, athletic or other school administered programs.

\_\_\_\_\_ I have enclosed my Personal Portfolio.

**APPLICATION FEE:**

There is a nonrefundable \$100.00 (USD) education evaluation deposit, which I understand will be applied to my tuition if I am accepted for admission.

**PAYMENT OPTIONS:** \_\_\_\_\_ Check \_\_\_\_\_ MasterCard /VISA \_\_\_\_\_ PayPal

Card #: \_\_\_\_\_ Sec.Code: \_\_\_\_\_ Exp. Date: \_\_\_/\_\_\_

Paypal: Send payment to PayPal account: [university@iups.edu](mailto:university@iups.edu)

Check: Please mail to IUPS Satellite Office, 53 Club View Drive, Novato CA 94949

Fax all application materials to: (413) 641-3272, or send as an attachment to: [university@iups.edu](mailto:university@iups.edu)

(Please note that 12 & 24 month payment plans are available.)

**TRANSCRIPTS:**

Please have all official transcripts send to the above address at our satellite office. We request a Bachelor's degree transcript only from the institution that you received your degree from. Please also send Masters and Doctorate transcripts, if applicable, as well as any others that are relevant to your program.

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I UNDERSTAND THAT INTERNATIONAL UNIVERSITY OF PROFESSIONAL STUDIES IS NOT ACCREDITED BY AN ACCREDITING AGENCY RECOGNIZED BY THE UNITED STATES SECRETARY OF EDUCATION.

Note: In the United States, many licensing authorities require accredited degrees as the basis for eligibility for licensing. In some cases, accredited colleges may not accept for transfer, courses and degrees completed at unaccredited colleges, and some employers may require an accredited degree as a basis for eligibility for employment.

Applicant's Name (Please Print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_