



*School of Graduate & Professional Studies*

Application for Admission  
Graduate



2100 W. Orangewood Ave., Ste. 100  
Orange, California 92868 U.S.A.  
888-352-HOPE • [www.hiu.edu](http://www.hiu.edu)



# Financial Aid Process

2100 W. Orangewood Ave.  
Suite 100  
Orange, CA 92868 USA  
888-352-HOPE  
FAX: (714) 681-7450  
sgpsadmissions@hiu.edu

A university education is a worthwhile investment that pays dividends throughout your life and the Financial Aid Office at Hope International University is committed to helping you through the process of funding your education. Please review the steps below:

## STEP 1: Submit a FAFSA Application

- Complete a Free Application for Federal Student Aid (FAFSA), by visiting [www.fafsa.ed.gov](http://www.fafsa.ed.gov).
- Apply for a Personal Identification Number (PIN) via [www.pin.ed.gov](http://www.pin.ed.gov) so that you may electronically sign your FAFSA application.

Your *Financial Aid Award Letter* will be mailed to you upon our receipt of your FAFSA application and SGS Financial Aid Questionnaire (Step 3). If you will not be completing a FAFSA application, proceed to Steps 3 and 4.

## STEP 2: Completion of Required Loan Documents

Graduate students are typically eligible for student loans only and the annual loan limits are listed below. You must be enrolled at least half-time as a masters (5 units) or teaching credential student (6 units) per semester.

	Master's Students	Teaching Credential Students
Federal Stafford Subsidized Loan	\$8,500	\$5,500
Federal Stafford Unsubsidized Loan	\$12,000	\$7,500

Visit [www.edfund.org](http://www.edfund.org) to complete the Entrance Loan Counseling session (or EDTEST) and then select the link to the Electronic Stafford Master Promissory Note (MPN).

## STEP 3: Complete a SGS Financial Aid Questionnaire

Complete via the following link: [https://www.hiu.edu/sgs/admissions/finaid/fa\\_onlineforms.asp](https://www.hiu.edu/sgs/admissions/finaid/fa_onlineforms.asp)

## STEP 4: Contact the Student Accounts Department

The Student Accounts Department posts your tuition charges, credits, and payments to your account, in addition to processing any student refunds you may be eligible to receive. Please contact the Student Accounts Department at (714) 879-3901, x7306 to receive information on their required forms. And, note as an *alternative* to borrowing federal student loans, the following payment options are available:

- Direct cash payments may be submitted to the Student Accounts Department
- Enrollment in the Tuition Management Systems (TMS) Payment Plan
- Apply for an alternative/private education loan

Additional information on how to enroll in the tuition payment plan may be obtained from your Student Accounts Representative. Information on alternative loan options is available through the Financial Aid and Student Accounts departments.

Should you have any questions or need any additional assistance, please contact the Financial Aid Office at (714) 879-3901, x2638 or email us at [financial-aid@hiu.edu](mailto:financial-aid@hiu.edu) and be sure to specify your program of study.



# Admission Process Checklist

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sgpsadmissions@hiu.edu

**Send these five items to the School of Graduate & Professional Studies:**

1. A completed graduate application for admission.
2. An application fee in the form of a check, credit card, or money order made payable to Hope International University.
3. A 250 - word definitive Statement of Purpose explaining your reasons for desiring to attend Hope International University.  
*Note: Marriage and Family Therapy (M.A. in MFT) applicants are required to complete a Comprehensive Career Statement in lieu of a statement of purpose as well as scheduling a personal interview.*
4. Two reference forms filled out by 1) an educator, and 2) an employer or church leader. (References must be sent directly from recommender to the Graduate and Adult Admissions office.)
5. Official transcript(s) from an accredited university or college confirming completion of an undergraduate degree and any completed graduate work. Applicants desiring to be considered for waiver of transfer or prerequisite courses must submit relevant transcripts indicating graduate level courses or undergraduate courses respectively with a satisfactory grade of B or better. If any college work is in progress at the time of this application, a final transcript with your degree posted must be sent when the work is complete. (Transcripts must be sent directly from institutions to the Graduate and Adult Admissions office.)

**Application Check List:** (for your records)

- Graduate Application for Admission
- Application fee
- Statement of Purpose or Comprehensive Career Statement (*M.A. in MFT applicants only*)
- Reference Form #1 Given to: \_\_\_\_\_
- Reference Form #2 Given to: \_\_\_\_\_

Transcripts requested from:

- College 1 \_\_\_\_\_ Date requested \_\_\_\_/\_\_\_\_/\_\_\_\_
- College 2 \_\_\_\_\_ Date requested \_\_\_\_/\_\_\_\_/\_\_\_\_
- College 3 \_\_\_\_\_ Date requested \_\_\_\_/\_\_\_\_/\_\_\_\_

*Education program applicants only:*

- CSET score: \_\_\_\_\_ Date taken \_\_\_\_/\_\_\_\_/\_\_\_\_
- CBEST score: \_\_\_\_\_ Date taken \_\_\_\_/\_\_\_\_/\_\_\_\_

**International Students:** (Please submit the following additional required documents)

- TOEFL score: \_\_\_\_\_ Date taken \_\_\_\_/\_\_\_\_/\_\_\_\_
- Financial Bank statements
- Affidavit of financial support
- SEVIS I-20 application



School of Graduate & Professional Studies

# Request for Official Transcript

2100 W. Orangewood Ave.  
Suite 100  
Orange, CA 92868 USA  
888-352-HOPE  
FAX: (714) 681-7450  
sgpsadmissions@hiu.edu

Student copies are unacceptable

**Important:** Applicants for the Teaching Credential Programs must request **two** official college transcripts and records of military schools.

**To: Registrar of College/University**

Please send \_\_\_\_\_ copy of official transcript(s) of:

Student Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip

Name(s) registered under \_\_\_\_\_

Social Security # or Pin # \_\_\_\_\_ I was a student from \_\_\_\_\_ to \_\_\_\_\_  
Month/Year Month/Year

\_\_\_\_\_  
Student's Signature Date

**Registrar: Please attach this form to transcript and mail to:**

Hope International University • School of Graduate & Professional Studies: 2100 W. Orangewood Ave., Ste. 100 • Orange, CA 92868

51304803



School of Graduate & Professional Studies

# Request for Official Transcript

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Student copies are unacceptable

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**To: Registrar of College/University**

Please send \_\_\_\_\_ copy of official transcript(s) of:

Student Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip

Name(s) registered under \_\_\_\_\_

Social Security # or Pin # \_\_\_\_\_ I was a student from \_\_\_\_\_ to \_\_\_\_\_  
Month/Year Month/Year

\_\_\_\_\_  
Student's Signature Date

**Registrar: Please attach this form to transcript and mail to:**

Hope International University • School of Graduate & Professional Studies: 2100 W. Orangewood Ave., Ste. 100 • Orange, CA 92868

51304803



# Application for Admission Graduate

2100 W. Orangewood Ave.  
Suite 100  
Orange, CA 92868 USA  
888-352-HOPE  
FAX: (714) 681-7450  
sgpsadmissions@hiu.edu

Return this application with a non-refundable application fee of \$40.00 payable to Hope International University. (Waived for Graduates of PCC and SGPS.)

Mr. Ms. Mrs. (circle one)

Applicant's Name \_\_\_\_\_  
Last First Middle (Maiden)

Current Address \_\_\_\_\_  
Street City State Zip

Email Address \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_-\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_-\_\_\_\_ Gender (circle one) Male Female Soc. Sec.# \_\_\_\_\_

Are you a citizen of the United States of America? (circle one) Yes No If no, of what country? \_\_\_\_\_

If you are not a U.S. citizen, please indicate your immigration status:  International Student  Visiting Scholar  
 Permanent Resident  Resident Alien  
 Other

How did you hear about the program?  Print Ad  Radio  Fair  Church Affiliation  Alumni  Mailer  Current Student  
 Internet Search Engine  Other \_\_\_\_\_

**Program for which you are applying:**

- Master of Education
- Master of Arts in Education Administration
- M.Ed. with Multiple Subject Teaching Credential
- M.Ed. with Single Subject Teaching Credential
- M.A. Education Administration with Preliminary Administrative Service Credential
- Multiple Subject Teaching Credential
- Single Subject Teaching Credential
- Administrative Service Credential
- Master of Science in Management: International Development, Non Profit, Marketing, Human Resource, Global Business
- Master of Business Administration: International Development, Non-Profit, Marketing, Human Resource, Global Business
- Grad Certificate in International Development
- Master of Arts- Emphasis: Christian Leadership, Church Planting, Inter-Cultural, Worship
- Master of Arts Marriage and Family Therapy

Term for which you are applying: Year 20\_\_\_\_

- Fall  Summer
- Spring

**Post Secondary Educational Background (regardless of degree completion)**

College or University	City and State	Attended (From - To)	Major	Degree Type/Mo./Yr.	GPA	Units Finished

Military Service:  Yes  No Branch: \_\_\_\_\_ Discharge Date: \_\_\_\_\_ (if applicable)

(continued on next page)

## Ethnic Origin (Optional)

American-Indian     Caucasian     African American     Hispanic     Asian or Pacific Islander

Other (please specify) \_\_\_\_\_

I am bilingual. Language(s) \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Birthplace \_\_\_\_\_  
City State Zip

Status (*circle one*) Single Widowed Divorced Married If married, Name of Spouse \_\_\_\_\_

## Education Applicants Only

### Test Results

Date CBEST taken: \_\_\_\_\_ Results: \_\_\_\_\_ Plan to take: \_\_\_\_\_

Date CSET taken: \_\_\_\_\_ Results: \_\_\_\_\_ Plan to take: \_\_\_\_\_

## Employer Information

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_

Position or Job Title \_\_\_\_\_ Date of Employment \_\_\_\_\_

## References

*Note: For Education Department applicants, one reference must be from a person who has witnessed your work/supervision with children.*

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_  
City State Zip

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_  
City State Zip

## Financial Aid Information

Do you plan on applying for financial aid?  Yes  No

I will receive aid from an  Employer  Other: \_\_\_\_\_

## Statement of Purpose

Please attach a written statement of purpose (250 words) indicating why you desire to attend Hope International University. In lieu of the statement of purpose, MFT applicants are required to complete a comprehensive career statement (see addendum) as well as an interview as part of the admission requirements.

If admitted, I hereby grant permission for use of my name and/or photograph in publicity, publications, and/or advertising for Hope International University.  Yes  No

I hereby certify that the information contained in this application is accurate and complete to the best of my knowledge. If admitted to Hope International University, I commit to abide by all the rules and regulations of the institution, and to apply myself to study and to fulfill the course requirements to the best of my ability. I understand that all admissions materials or information submitted becomes the property of the university and are not returnable.

HOPE INTERNATIONAL UNIVERSITY does not discriminate in its admission decisions on the basis of race, color, national origin, marital status, physical handicap, medical condition, or gender.

Applicant's Signature (Required) \_\_\_\_\_ Date \_\_\_\_\_

*"Empowering students through Christian higher education to serve the Church and impact the world for Christ."*

Return completed application to: **School of Graduate & Professional Studies Admissions**  
Hope International University, 2100 W. Orangewood Ave., Ste. 100, Orange, CA 92868



# Comprehensive Career Statement for Admission into the MFT Program

School of Graduate & Professional Studies

2100 W. Orangewood Ave.  
Suite 100  
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888-352-HOPE  
FAX: (714) 681-7450  
sgpsadmissions@hiu.edu

The MFT program at Hope International University is looking for individuals who have professional goals consistent with our program, the ability to handle the academic rigor of the program, and the personal qualities required of marriage and family therapists. For this reason, we require a comprehensive career statement as a part of the application process for the MFT program. The comprehensive career statement replaces the required statement of purpose on the application form. The comprehensive career statement should address the following questions:

1. What significant life events have most influenced your present development and your desire to be a marriage and family therapist?
2. What are your professional career goals after completing your degree?
3. What are your strengths that will help you achieve your professional goals?
4. What do you consider to be areas for personal growth that may need the most attention during your training as a therapist at Hope International University?





# Graduate Reference

2100 W. Orangewood Ave.  
 Suite 100  
 Orange, CA 92868 USA  
 888-352-HOPE  
 FAX: (714) 681-7450  
 sgpsadmissions@hiu.edu

This form may be duplicated or a separate letter of reference may be used. Reference letters must not be dated over 6 months.

Name of Candidate \_\_\_\_\_  
Last First Middle Date \_\_\_\_\_

I, \_\_\_\_\_, waive my right of access to see this letter of reference.  
Student Signature

I, \_\_\_\_\_, do not waive my right of access to this letter of reference.  
Student Signature

The above-named candidate has applied for admission into the  Education  Ministry  Management  Psychology and Counseling Department at Hope International University. Please complete this form to the best of your ability and mail it to the address below.

How long have you known the candidate? \_\_\_\_\_

In what capacity? \_\_\_\_\_

Compared to individuals you have known at a similar level of development, please rate the candidate on the following items by checking the appropriate box.

	Excellent	Good	Fair	Weak	N/A
Academic Ability					
Communication Skills					
Cooperation					
Creativity					
Dependability					
Leadership					
Motivation					
Potential for Success in Education					

Comments (use back of page if necessary):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Institution/Employer \_\_\_\_\_

Position \_\_\_\_\_

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

Mail this form to the School of Graduate & Professional Studies, Hope International University, 2100 W. Orangewood Ave., Ste. 100, Orange, CA 92868.

HOPE INTERNATIONAL UNIVERSITY  
 SCHOOL OF GRADUATE & PROFESSIONAL STUDIES ADMISSION  
 2100 W. ORANGEWOOD AVE., STE. 100  
 ORANGE, CA 92868



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Name of Candidate \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

I, \_\_\_\_\_, waive my right of access to see this letter of reference.  
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Cooperation					
Creativity					
Dependability					
Leadership					
Motivation					
Potential for Success in Education					

Comments (use back of page if necessary):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Institution/Employer \_\_\_\_\_

Position \_\_\_\_\_

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

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