COLLEGE OF MICRONESIA-FSMOffice of Admissions and Records www.com/sm.fm

Accredited by the Western Association of Schools and Colleges (WASC)

ADDITO ATION FOR

NATIONAL CAMPUS

P.O. Box 159 Palikir, Pohnpei, FSM 96941 Phone: (691) 320-2480

PHONPEI CAMPUS

P.O. Box 614 Kolonia, Pohnpei, FSM 96941 Phone: (691) 320-3795

DE ADMICCIONIC

CHUUK CAMPUS

P.O. Box 879 Weno, Chuuk, FSM 96942 Phone: (691) 330-2689

KOSRAE CAMPUS

P.O. Box 37 Tofol, Kosrae, FSM 96944 Phone: (691) 370-3191

YAP CAMPUS

P.O. Box 286 Colonia, Yap, FSM 96943 Phone: (691) 350-2296

FSM FMI

P.O. Box 1056 Colonia, Yap, FSM 96943 Phone: 350-5244

APPLICATION FOR RE-ADMISSIONS		
Name (Last Name, First Name, Middle Name) 2 Date		
For Academic Term Spring Summer Fall Year	4 Campus or Site	5 Sex Male Female
6 Mailing Address (P.O. Box, Street, City, State, Country, ZIP Code) 7 Date of Birth (MM/DD/YYYY)		
8 Social Security Number 9 Phone Number	10 E-M	ail Address
CHECK THE PROGRAM YOU PLAN TO FOLLOW IF YOU RETURN TO COM-FSM		
Liberal Arts Teacher Preparation Business Administration Computer Information Systems Media Studies Liberal Arts/HCOP Liberal Arts/HCOP Micronesian Studies General Agriculture Early Childhood Education Teacher Education (State Campus Only) Marine Science Hotel and Restaurant Management (Pohnpei Campus Only) Associate of Applied Science, major in Certificate of Achievement in Third Year Certificate of Achievement in		
1 1 Why did you leave COM-FSM?		
12 Why do you wish to return to COM-FSM? 13 What do you plan to do if you finish your degree at COM-FSM?		
Describe what activities you have been doing since you left COM-FSM? Example: Describe any job (s) you have had. List any College or other courses you have taken. Describe any travel you have taken outside your State?		
15 Where do you wish to live? Dormitory Off Campus 16 If you wish to live off-campus, list name and complete address of your sponsor		
17 While at COM-FSM, you were provided with a round trip ticket to COM-FSM and back to your home sate. COM-FSM can provide only one ticket per student while attending COM-FSM. Therefore, you must provide your own transportation to and from COM-FSM when you return. Can you provide your own transportation to and from COM-FSM?	FOR BUSINESS OFFICE Applicant has oustanding bal Amount Processed by (Initials) and Date Processed	
All COM-FSM students must apply for PELL GRANT, mail your PELL GRANT APPLICATION FORM today to Federal Student Aid Program P.O. Box 4032 lowa City, lowa 52243 Date PELL GRANT APPLICATION mailed Date PELL GRANT APPLICATION mailed		
Date Date		
RECORDED BY JOB TITLE	DATE R	ECORDED