



COLLEGE OF MICRONESIA - FSM

P.O. Box 159, Kolonia, Pohnpei, FSM 96941

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THIRD YEAR PROGRAM IN TEACHER PREPARATION-ELEMENTARY APPLICATION FORM

1 Applicant's Name (Last Name, First Name, Middle Name)		2 Date of Application	
3 For Academic Term <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall Year _____		4 Mailing Address (P.O. Box, Street, City, State, Country, Zip Code)	
5 What degree have you completed? <input type="checkbox"/> TYC <input type="checkbox"/> AA <input type="checkbox"/> AS Major _____		6 Date of Graduation	7 Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
8 Date of Birth (MM/DD/YY)	9 Social Security Number	10 Phone & Fax Number	11 Email Address
12 Citizenship <input type="checkbox"/> Micronesian <input type="checkbox"/> Others, Specify _____		13 Admission Type <input type="checkbox"/> Continuing Student <input type="checkbox"/> Transfer Student	
14 Admission Status <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		15 How do you plan to finance your education? <input type="checkbox"/> Financial Aid <input type="checkbox"/> Family/Personal Savings <input type="checkbox"/> Others _____	
16 Upon completion of program, you plan to (Please check the relevant boxes) <input type="checkbox"/> Continue my education with another institution <input type="checkbox"/> Continue with another program with COM-FSM <input type="checkbox"/> Get an Entry level job (my first full-time job) <input type="checkbox"/> Continue to work at the same place <input type="checkbox"/> Get a new job (at a place from where I currently work)		17 Do you have any physical handicap or major health problem? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	

Indicate any college education courses other than COM-FSM education courses and/or credits you have completed and/or earned			
College	Address	Education Courses (Course Number and Title)	Credits

Write a brief statement as to why you want to enroll in the Third-Year Certificate in Teacher Preparation - Elementary

THE STATEMENTS IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE	18 Applicant's (Signature over printed name) Date
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For Education Program Coordinator/Instructional Coordinator			
Cummulative GPA at end of two year program (2.5)	<input type="text"/>	Entrance Essay Score (15)	<input type="text"/>
National Standardized Test for Teachers		<input type="checkbox"/> Passed <input type="checkbox"/> Not Passed	

19 Program Coordinator/Instructional Coordinator <input type="checkbox"/> Approved <input type="checkbox"/> Denied	20 Program Coordinator/Instructional Coordinator Signature Date
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FOR OFFICE OF ADMISSIONS, RECORDS & RETENTION USE ONLY Files Complete <input type="checkbox"/> Yes <input type="checkbox"/> No Last Academic Term Attended <input type="text"/> CumGPA <input type="text"/> Credits Earned <input type="text"/> REMARKS <input type="text"/> Processed by (Initials) and Date Processed <input type="text"/>	FOR BUSINESS OFFICE USE ONLY Applicant has outstanding balance <input type="checkbox"/> Yes <input type="checkbox"/> No Amount <input type="text"/> Campus <input type="text"/> REMARKS <input type="text"/> Processed by (Initials) and Date Processed <input type="text"/>
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