

Office of the Registrar

The University of America

41707 Winchester Road #301 Temecula CA 925690 USA



APPLICATION AND REGISTRATION FORM

1. PLEASE RETURN APPLICATION TO THE ADDRESS BELOW FOR AN INTERVIEW WITH THE REQUISITE APPLICATION FEES OF \$150
 2. FOUR MOST RECENT PASSPORT SIZE PHOTOGRAPHS
 3. A TWO PAGE HANDWRITTEN ESSAY NARRATING WHY YOU WISH TO BE A STUDENT OF UA.
 4. INCLUDE ALL OFFICIAL ACADEMIC RECORDS, RESULTS, CERTIFICATES, DIPLOMAS OR DEGREES OF ALL PREVIOUS SCHOOLS ATTENDED.
- ALL THE QUESTIONS IN THE APPLICATION MUST BE THOROUGHLY FILLED WITH A LEGIBLE HAND WRITING OR IT WILL BE REJECTED.

Email a completed application to us at info@ua-edu.us and send your hard copies to
The registrar

THE UNIVERSITY OF AMERICA
41707 Winchester Road #301 Temecula CA 925690 USA

TO MAKE EVERY PAYMENT TO THE UNIVERSITY

To make wire transfer, present the bank information below to your bank. This is the information you need for the wire transfer, after you have done the wire transfer, reply this email attaching the copies of the bank teller issued to you by your bank to enable us trace and confirm the payment

THE UNIVERSITY OF AMERICA BANKING INFORMATION

BANK NAME; **BANK OF AMERICA .**
BANK ADDRESS **MURRIETA BRANCH CALIFORNIA USA 92563-3500**
ACCOUNT NAME; **THE UNIVERSITY OF AMERICA UNIVERSITY SYS.**
ROUTING NUMBER; **121000358**
SWIFT CODE; **BOFAUS3N**
ACCOUNT NUMBER; **325056042179**

END OF PAGE 0 OF 4



OFFICE USE ONLY Cert./degree admitted _____
school year; _____ session

STUDENT S/No _____

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**The University of America
Admission Application Form**

DATE-----/-----/-----

CERTIFICATE/DEGREE PROGRAM WHICH YOU ARE APPLYING;

MAJOR _____ **MINOR** _____

YOUR FULL LEGAL NAME (LAST) _____ **(first)** _____
middle _____ **OTHER** _____

Social Security Number ____/____/____ **INTERNATIONAL PASSPORT**
NUMBER A _____ **COUNTRY** _____ **EXPIRES** _____

RELIGION; _____ **DENOMINATION** _____

CAMPUS APPLYING FROM **USA** ___ **ONLINE** _____ **OTHER** _____

DATE OF BIRTH _____

AGE _____

TRIBE-----**RACE**-----**GENDER**---M—F **MARRIED** -YES, NO--

PLACE OF BIRTH _____ **US CITIZEN ?** __YES , NO__

ON VISA? YES_ NO_ VISA TYPE _____ **VISA EXPIRE DATE** _____

COUNTRY OF BIRTH _____

CURRENT ADDRESS _____

PERMENENT ADDRESS _____

CONTACT TELEPHONE-@-HOME_____CELL_____

EMAIL;_____

Students 25 years old and below must provide the university with their parents information below;

PARENTS FULL NAME ;FATHER_____

PARENTS FULL NAME;MOTHER_____

PARENTS OCCUPATION_____

PARENTS PHONE NUMBERS; HOME_____WORK_____

PARENTS CELL_____

PARENTS ADRESS_____

PARENTS E-MAIL ADDRESS_____

ANY DISABILITY OR HEALTH CONDITION , DESCRIBE-----

- SPEECH PROBLEM OR LEARNING DISABILITY_____

IN THE CASE OF AN EMERGENCY WHO DO YOU WANT THE SCHOOL TO CONTACT;-

FULL NAME;_____

ADDRESS_____

RELATIONSHIP TO YOU_____

TELEPHONE_____CELL_____

LANGUAGES YOU READ AND WRITE IN_____

EDUCATION AND TRAINING

NAME OF THE PRIMARY/ ELEMENTARY SCHOOL YOU ATTENDED;

FROM_____TO_____NAME AND FULL ADDRESS OF SCHOOL;

CERTIFICATE RECEIVED_____DATE_____

HIGH SCHOOL/SECONDARY SCHOOL

FROM_____TO_____

FULL NAME AND ADDRESS OF THE SECONDARY SCHOOL YOU ATTENDED
SCHOOL _____

CERTIFICATE/ DIPLOMA AWARDED _____ DATE _____

COLLEGE/UNIVERSITIES ATTENDED

NAME AND FULL ADDRESS OF THE COLLEGE _____

FROM _____ TO _____ MAJOR SUBJECT _____

DEGREE /DIPLOMA AWARDED _____

GRADUATION DATE _____

COLLEGE/UNIVERSITY _____

FROM _____ TO _____ MAJOR subject _____ MINOR _____

DEGREE/ DIPLOMA AWARDED _____

GRADUATION DATE _____

COLLEGE/UNIVERSITY _____

FROM _____ TO _____ MAJOR SUBJECT _____ MINOR _____

DEGREE/DIPLOMA AWARDED _____

GRADUATION DATE _____

RETURN THIS APPLICATION WITH 4 MOST CURRENT PASSPORT COLOR PICTURES (2)ALL CERTIFICATES ,
DIPLOMAS AND ORDINATION CERT,HIGH SCHOOL DIPLOMA, OR GED (3) WRITE A LETTER EXPLAINING
WHY YOU WISH TO STUDY AT THE UA (4) \$150 NON-REFUNDABLE PROCESSING FEES.

I _____ BY SIGNING BELOW, HAVE ACKNOWLEDGED THAT I
HAVE PERSONALLY OBTAINED AND READ THE UA'S BROCHURE CONTAINING ALL ITS PROGRAMS AND
HAVE ALL MY QUESTIONS ANSWERED BEFORE I PROCEEDED WITH THIS APPLICATION, I HAVE READ
AND UNDERSTAND THE REFUND POLICY,STUDENTS ADMISSION AND ACADEMIC POLICIES, AND I ALSO
UNDERSTAND THAT BELONGING TO A GANG, CULT ,EXAM MALPRATICE,LATE TO CLASS, UN EXCUSED
ABSENTISM ,TARDNESS, RIOTING, FIGHT, DISRESPECTING A LECTURER OR ANY UA PERSONNEL
,DISRUPTING THE CLASS,OR BEING CAUGHT OR ARRESTED IN ANY VICES OF ANY MORAL TURPITUDE e.g.
THEFT, ARMED ROBBERY, PROSTITUTION, MURDER,TRIBALISM, ARSON AND TERRORISM, FALSIFICATION
OF ACADEMIC RECORDS,FRAUDULENT CERTIFICATE ET CETERA,

WILL RESULT IN IMMEDIATE TERMINATION, CANCELLATION AND WITHDRAWAL OF MY ADMISSION AND MY BEING A STUDENT OF UA WITHOUT ANY REFUND.

I _____ have read the catalogue of the UNIVERSITY OF AMERICA in its entirety, the return policy and student's policy have been explained to me, I understand that university of America's program is not designed for any particular employer, examination/certification boards, local licensing authority in mind, and is specifically designed with the international students without affiliation to any particular state or country in mind. I understand that anyone wishing to transfer to other schools or studying for certification at a particular region and for employment, should first inquire about their acceptability of our program before applying. signing underneath signify that I have checked about all these and have made up my mind to apply without coercion or duress or manipulation from any UA official either in person by email or UA's literature.

I _____ have read and understand that The University of America is a university in the ancient Judeo-Christian Baptist tradition, and as such may teach certain things regarding the Christian world view that I may consider to be against my philosophy of life, brief, creed, Religion, sincerely held belief, lifestyle or sexual orientation: I understand that once admitted as an undergraduate student of this university, I am required to take and pass 15-30 credit semester hrs of Bible, Theology and Ministry related courses as part of graduation from any undergraduate degree of The University of America: and By signing this application form, I indemnify and hold the university board, its Administration and faculty harmless from all liabilities and law suits knowing that the university and its instructors do not mean to personally target me as a person because of my belief, lifestyle. Race or religion. I understand that I have 72 hrs after admission, to change, my mind and receive full refund if am not comfortable attending a Christian university. After 72 hours of admission, I have made up mind to stay and study in UA at my own risk and expense and I am expected to complete the required 15-30 without which, I will not graduate, no exemption for anyone regardless of belief, lifestyle. Race or religion.

APPLICANT SIGNATURE _____ DATE _____

YOUR FULL NAME _____

WITNESS;

FULL NAME _____ DATE _____

SIGNATURE _____

OFFICE USE ONLY

THE UA's REGISTRAR

REGISTRATION PAID, --- NOT PAID---ATTACH PROOF

SIGNATURE _____

UA STAMP OR SEALFULL

NAME _____

HERE



The University of America

The Student's Semester Registration Application

Date of Application ___/___/___

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CANDIDATE'S FULL NAME _____

ADDRESS _____

TEL _____ CELLPHONE _____

EMAIL ADDRESS _____

SEMESTER REGISTERED _____ TO _____ 200__ SESSION

HOW MANY SEMESTER UNITS _____, Subjects registered _____

LEVEL;- JUNIOR, SOPHPMORE, SENIOR _____

REGISTERED DEGREE/DIPLOMA/CERTIFICATE DESCRIPTION _____

MAJOR _____ MINOR _____

I _____ have read the catalogue of the UNIVERSITY OF AMERICA in its entirety, the return policy and student's policy have been explained to me, I understand that university of America's program is not designed for any particular employer, examination/certification boards, local licensing authority in mind, and is specifically designed with the international students without affiliation to any particular state or country in mind. I understand that anyone wishing to transfer to other schools or studying for certification at a particular region and for employment, should first inquire about their acceptability of our program before applying. signing underneath signify that I have checked about all these and have made up my mind to apply without coercion or duress or manipulation from any UA official either in person by email or UA's literature.

STUDENT'S NAME _____ STUDENT'S SIGNATURE _____ DATE ___/___/___

OFFICE OF THE REGISTRAR USE ONLY;

DATE STUDENT REGISTERED ___/___/___ STU. REGISTRATION # _____

ALL REGISTRATION PAYMENTS MADE IN FULL __ YES, NO __ AMOUNT PAID \$ _____

THE AMOUNT OF DEPOSIT PAID \$ _____ WITH BANK-TELLER EVIDENCE? __ YES,NO __

METHODS OF PAYMENTS WHICH THE STUDENT USED, MONEY GRAM, MONEY ORDER, WESTERN UNION, BANK CHEQUE, CREDIT CARD PAYMENTS _____

THE REGISTRAR OR BURSAR HAS CHECKED THE UA BANK AND THE STUDENT'S RECEIPT OF PAYMENTS IS VARIFIED AND THE ACCOUNT HAS CLEARED?, YES __NO__
IF THE ANSWERS ARE YES, STUDENT IS REGISTERED ISSUED A RECEIPT, A STUDENT ID CARD, ACCETANCE LETTER WITH ALL THE INFORMATION ABOUT THE SCHOOL'S SEMESTER CALENDAR .

Payment arrangements

I _____ have accepted the total cost of \$usd_____ material fees required to complete the subject (s) which I have herein registered to study and agreed to be responsible for the repayment of the same at the rate USD\$_____ per month for_____ months until finish. I also understands that ,this payment arrangement once signed, I am under obligation to complete the payment even if the class is not attended or completed. Failure to pay it off may result in the university initiating debt collection action against me and refusal to offer services like honoring my request to obtain copies of my diploma, transcripts etc, until I have paid all dues herein delineated .

I waited for three days before personally signing this registration and payment arrangement portion

Sign _____ name _____ date _____

Last four digit of DL/SSN _____ STATE OF ISSUE _____ COUNTRY _____

OFFICE USE ONLY

REGISTRATION COMPLETED _____ YES, NO _____

ADMITTED BY

FULL NAME _____ POSITION _____

UAPID # _____

SIGNATURE _____ DATE _____

REGISTRAR

FOR THE RGISTRAR

PLACE STAMP

HERE

END OF REGISTRATION APPLICATION,NOTHING BEYOND THIS POINT PG 2 OF 2