

RECORD OF PREVIOUS EDUCATION AND TRAINING

University of Hawaii at Manoa

Instructions: Students receiving VA educational benefits do not have the “option” of having prior credit reviewed. ALL previous education and training must be provided to the school for review including requested course descriptions and syllabi. Complete each item and if an item is not applicable, write “N/A.” If credit is being claimed for postsecondary education, a transcript must be provided. Credit for experience should also be granted, if justified by the school’s evaluation of the student’s skills. Attach additional pages as needed. If additional clarification is required, contact: **Hawaii – State Approving Agency for Veterans’ Training - (808) 956-6624**

STUDENT INFORMATION					
NAME: _____	SSN: _____	DATE OF BIRTH: _____			
CURRENT MAJOR: _____	TERM OF ENROLLMENT: _____				
HIGH SCHOOL DIPLOMA:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	GED:	<input type="checkbox"/> YES	<input type="checkbox"/> NO

POSTSECONDARY EDUCATION (College, University, Technical/ Vocational School, Etc) – Attach Additional Sheet If Needed					
<i>Name of School</i> _____	_____	<i>Location</i> _____			
<i>Dates Attended</i> _____	_____	<i>Graduated (Yes or No)</i> _____			
<i>Type of Diploma or Degree</i> _____	_____	<i>Major Field of Study</i> _____			
<i>Name of School</i> _____	_____	<i>Location</i> _____			
<i>Dates Attended</i> _____	_____	<i>Graduated (Yes or No)</i> _____			
<i>Type of Diploma or Degree</i> _____	_____	<i>Major Field of Study</i> _____			
<i>Name of School</i> _____	_____	<i>Location</i> _____			
<i>Dates Attended</i> _____	_____	<i>Graduated (Yes or No)</i> _____			
<i>Type of Diploma or Degree</i> _____	_____	<i>Major Field of Study</i> _____			
<i>Name of School</i> _____	_____	<i>Location</i> _____			
<i>Dates Attended</i> _____	_____	<i>Graduated (Yes or No)</i> _____			
<i>Type of Diploma or Degree</i> _____	_____	<i>Major Field of Study</i> _____			

PREVIOUS EXPERIENCE – Attach Additional Sheet If Needed	
Indicate military training if completed basic training or served in the Armed Forces.	

I certify that I have provided all of the information above prior to my enrollment at UH Manoa.

Signature of Student: _____ Date: _____

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