



COLLEGE OF MICRONESIA - FSM

Office of Admissions, Records and Retention

www.comfsm.fm

Accredited by the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges, an institutional accrediting body recognized by the Council of Higher Education Accreditation and the U.S. Department of Education.

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

CAREER & TECHNICAL EDUC. CENTER
P.O. Box 614
Kolonia, Pohnpei, FSM 96941
Phone: (691) 320-3795

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

KOSRAE CAMPUS
P.O. Box 37
Tofof, 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: (691) 350-2244

APPLICATION FOR RE-ADMISSION

Steps:

- 1 Complete this form if you are applying for re-admission
- 2 Bring the form to the Business office for assessment of account and outstanding balance
- 3 Sign and submit the form to the Office of Admission, Records & Retention

PERSONAL IDENTIFICATION

1 Name (Last Name, First Name, Middle Initial)	2 Campus or Site <input type="checkbox"/> CTEC <input type="checkbox"/> Chuuk <input type="checkbox"/> FMI <input type="checkbox"/> Kosrae <input type="checkbox"/> National <input type="checkbox"/> Yap	3 Date
4 Mailing Address (P.O. Box, Street, City, State, Country, Zip Code)	5 Date of Birth (MM/DD/YYYY)	6 Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
7 E-mail Address & Phone Number	8 Social Security Number	9 For Academic Term <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall Year _____

Please check the box of the program you plan to follow if you return to COM-FSM

Bachelor of Science Degree <input type="checkbox"/> Elementary Education Third Year Certificate of Achievement <input type="checkbox"/> Accounting <input type="checkbox"/> General Business <input type="checkbox"/> Public Health <input type="checkbox"/> Teacher Preparation-Elementary Associate of Arts Degree <input type="checkbox"/> Health Career Opportunity Program <input type="checkbox"/> Liberal Arts <input type="checkbox"/> Micronesian Studies <input type="checkbox"/> Pre-Teacher Preparation Other Degree/Certificate Not Mentioned Above (Please specify) _____	Associate of Science Degree <input type="checkbox"/> Agriculture & Natural Resources Mgmt. <input type="checkbox"/> Business Administration <input type="checkbox"/> Computer Information Systems <input type="checkbox"/> Marine Science <input type="checkbox"/> Nursing <input type="checkbox"/> Public Health <input type="checkbox"/> Hospitality & Tourism Management Associate of Applied Science Degree <input type="checkbox"/> Building Technology <input type="checkbox"/> Electronics Technology <input type="checkbox"/> Telecommunication Technology	Certificate of Achievement <input type="checkbox"/> Agriculture and Food Technology <input type="checkbox"/> Bookkeeping <input type="checkbox"/> Cabinet Making <input type="checkbox"/> Career Education: Motor Vehicle Mechanics <input type="checkbox"/> Carpentry <input type="checkbox"/> Community Health Services <input type="checkbox"/> Construction Electricity <input type="checkbox"/> Electronic Engineering Technology <input type="checkbox"/> Nursing Assistant <input type="checkbox"/> Public Health <input type="checkbox"/> Refrigeration and Air Conditioning <input type="checkbox"/> Trial Counselor
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10 Why did you leave COM-FSM?	
11 Why do you wish to return to COM-FSM?	
12 What do you plan to do if you finish your degree at COM-FSM?	
13 Describe what activities have you been doing since you left COM-FSM? Example: Describe any job(s) you have had. List any college or courses you have taken. Describe any travel you have taken outside your State?	
14 Where do you wish to live? <input type="checkbox"/> Dormitory <input type="checkbox"/> Off campus	15 If you wish to live off-campus, list the name and address of your sponsor

16 While at the college, you provided with a round trip ticket to the college campus of your program and back to your home state. The college can only provide one ticket per student while attending the college. 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? <input type="checkbox"/> Yes <input type="checkbox"/> No	FOR BUSINESS OFFICE USE ONLY Applicant has outstanding balance <input type="checkbox"/> YES <input type="checkbox"/> NO Amount _____ Campus _____ Processed by (Initials) and Date Processed _____
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THE STATEMENT IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE

All COM-FSM students must apply for PELL GRANT, mail your PELL GRANT APPLICATION FORM today to Federal Student Aid Program P.O. Box 4021 Iowa City, Iowa 52243	17 Student (Signature over printed name) _____ Date _____
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PROCESSED BY _____	JOB TITLE _____	DATE PROCESSED _____
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