



# University of Hawai'i at Mānoa

Department of Urban and Regional Planning  
Saunders Hall 107 • 2424 Maile Way • Honolulu, Hawai'i 96822  
Telephone: (808) 956-7381 • Fax: (808) 956-6870

## **ADMISSIONS ASSESSMENT FORM**

### **To be submitted by applicants to the Master's in Urban and Regional Planning (MURP)**

The Department of Urban and Regional Planning (DURP) at the University of Hawai'i at Manoa admits students with a broad range of prior academic, professional and life experience. It follows, then, that there is no one single set of attributes appropriate for a successful candidacy. The attached instrument is designed to augment what the Admissions Committee knows about a student, ensuring appropriate admissions decisions now and academic advising in the future.

#### Instructions:

- In the space provided, please indicate your experience with or exposure to each item. This should include but is not limited to course work or on-the-job experience in a given area.
- Please be brief but specific.

- Please submit this form directly to : Admissions Committee,  
Department of Urban and Regional Planning, Saunders Hall, #107,  
2424 Maile Way, Honolulu, Hawai'i, 96822.
- NB: It is not expected that an applicant have considerable  
experience in each area.

ASSESSMENT 05/04

## ADMISSIONS ASSESSMENT FORM

Name \_\_\_\_\_ Date \_\_\_\_\_  
Family/Last First Middle

1. **Social sciences insofar as they are relevant to urban and regional processes (e.g., coursework or fieldwork in urban economics or regional geography)**
2. **Natural Sciences insofar as they are relevant to urban and regional processes (e.g., coursework or fieldwork in environmental science)**
3. **Research Methods (e.g., statistical analysis, survey design or implementation experience)**
4. **Physical systems analysis and design (e.g., architectural practice, transportation engineering, urban design)**

5. Planning or administration (e.g., experience in a planning department, organizing a political campaign, administering a public health campaign)

## EXPRESS INFORMATION FORM

Complete this form and mail directly to the field of study to which you wish to apply. Refer to the enclosed list of department addresses. **YOU SHOULD MAIL THIS FORM AT THE SAME TIME YOU MAIL YOUR APPLICATION TO THE GRADUATE DIVISION.**

Field of Study to Which You Are Applying: \_\_\_\_\_

FULL LEGAL NAME: \_\_\_\_\_  
Family/Last Last Middle

SOCIAL SECURITY NUMBER: \_\_\_\_\_  
(if applicable)

MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_

CITIZENSHIP: \_\_\_\_\_ USA \_\_\_\_\_ OTHER \_\_\_\_\_  
(please check one) Specify Country

### DEGREES AWARDED/EXPECTED:

#### Bachelor's Degree

University/College: \_\_\_\_\_ State/Country: \_\_\_\_\_

Date Awarded: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_

#### Master's Degree

University/College: \_\_\_\_\_ State/Country: \_\_\_\_\_

Date Awarded: \_\_\_\_\_ Field: \_\_\_\_\_

Grade Point Average: \_\_\_\_\_

TOFEL: Your Score \_\_\_\_\_ Examination Date: \_\_\_\_\_

#### GRE/GMAT:

Quantitative \_\_\_\_\_ Verbal \_\_\_\_\_ Analytic \_\_\_\_\_

### NAME OF ONE ACADEMIC REFERENCE:

Name \_\_\_\_\_ Phone \_\_\_\_\_

If you will be paying your tuition and fees via self, sponsor, or family funds, please check here \_\_\_\_\_

If you need financial aid, please check here \_\_\_\_\_

I CERTIFY THAT THE ABOVE ANSWERS AND RESPONSES ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_