



ENROLLMENT OF PAST VERIFICATION REQUEST

Return to: Hawaii TOKAI International College

91-971 Farrington Hwy
Kapolei, HI 96707
Email: htic@tokai.edu
Phone : (808) 983-4100

Today's Date: _____ / _____ / _____

Time Received by OSS: _____

PLEASE PRINT CLEARLY

Print Full Name _____
LAST FIRST MIDDLE

Your name in Kanji _____

Student ID Number _____ Date of Birth _____

Student signature _____
(Verification will not be processed without student's signature)

Phone number _____ Email _____

Are you currently registered/enrolled at HTIC? YES NO School _____

If no, last attended HTIC: Fall Spring Summer Winter

Past Attendance CP LA

Please check one:

Pick-up (Please allow two business days for processing)

Mail to: _____

For Office Use: Date mailed/mailed _____ Date emailed _____ Picked up by/ Date _____



PLEASE PRINT CLEARLY

Total Number of certificate requested: _____

_____ Japanese copies \$10 each = _____ (For mailing 7days business days by regular air mail)

_____ English copies \$10 each = _____ (For mailing 7days business days by regular air mail)

Postage charge :(Note: Prices are subject to change. Your payment will be adjusted on current postage rate without notification.)

Regular air mail within the U.S. there is **no charge** (delivery within 14-21 business days)

For regular air mail outside U.S. **add \$2.00 per document** (delivery within 10-14 business days)

Priority mail within U.S. **add \$9** (delivery within 4-5 business days)

Express mail within the U.S. **add \$30**(delivery within 2-3 business days)

For Priority mail outside U.S. **add \$40**(delivery within 7 business days)

For Express mail outside the U.S **add \$78**(delivery within 3-5 business days)

Certificate Amount Due: _____ **Postage Amount Due:** _____ **Total Amount Due:** _____

Credit Card Payment

Type of CC: _____ CC# _____

Exp. Date: _____ Name on Card: _____ 3-Digit Security code: _____

Signature: _____

Email: _____ Telephone: _____

Mail request and payment to:

Register, Hawaii Tokai International College 91-971 Farrington Highway, Kapolei HI 96707

Email to: studentservices@tokai.edu or Fax to: 808-983-4173

For in person payment see the Accounting office on the 1st floor. (Room A119)

For Office Use: Date mailed/mailed _____ Date emailed _____ Picked up by/ Date _____