MBA GRADUATE PROGRAM APPLICATION

PERSONAL INFORMATION (Please print or type)

Legal Name ____________________________________________

Mailing Address _______________________________________

City __________________ State ____________ ZIP __________ Country ______

E-mail: ______________________________________________

Phone: Home (______) ________________________ Cell (______) ________________________

Work (______) ________________________ Ext. ________ Fax (______) ________________________

EDUCATIONAL BACKGROUND: (List all Institutions attended)
Official transcripts are required.

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<th>Name of institution</th>
<th>Graduation Date</th>
<th>GPA</th>
<th>Degree achieved</th>
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Other: ______________________________________________________________________

For International student, U.S. equivalency of degree/s conferred: Yes _____ No ______
Official US Equivalency documents are required.

MICHIGAN TEST: Score ______

TOEFL (Test of English as a Foreign Language): ______

OCCUPATIONAL BACKGROUND

A current resume is required indicating education and professional work experience.
MBA APPLICATION REQUIREMENTS

MBA CONCENTRATION OF CHOICE: Concentration may be changed during the first 6 months in the program.

General Management: _______ Marketing: _______ Finance: _______
Health Services Administration: _______ Public Management & Leadership: _______

ESSAY:

Explain your career goals and how this program will further these goals (Minimum 1 page/200 words.) This essay must demonstrate your ability to communicate effectively. Therefore, proper grammar and correct spelling are essential Attach essay to this application.

UNDERGRADUATE GRADE POINT AVERAGE: If undergraduate GPA is below 2.50, a GMAT or GRE test with scores of 400 or 900 respectively, is required.

GMAT (Graduate Management Admission Test): 

GRE (Graduate Record Exam – General Aptitude):

COMPUTER SKILLS NEEDED:

Applicant has access to a computer with capacity for video conferencing: Yes _____ No _____

REFERENCE LETTERS: 2 professional reference letters are required with the application.

I certify that the information given in this application is complete and accurate. I realize that my application cannot be reviewed until all requested credentials have been received by the Office of Admission, that it is my responsibility to support these credentials, and that concealment or misrepresentation of any college registration, academic, or disciplinary record – undergraduate and graduate – may cancel and nullify my application for admission. I understand that a personal interview will be granted by the Program Acceptance Committee where my application will be reviewed. If accepted, I agree to comply with the regulations of Florida National University and to pay all fees required.

I understand that all documents and credentials become the property of Florida National University and will not be copied or returned.

Signature of applicant: ___________________________ Date __________________

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