Application for Admission to the MBA Program

Please complete all pages of the application to the best of your ability.

Attach a **NON-REFUNDABLE** application fee of $50.00

(Cash; Cashier Check or Money Order payable to Florida Memorial University)

**PLEASE PRINT CLEARLY OR TYPE AND SEND TO**

School of Business
Florida Memorial University
15800 NW 42nd Avenue
Opa-Locka, FL 33054

☐ Ms.  ☐ Mrs.
☐ Mr.  ☐ Miss.
☐ Other Title _______________________

U.S. Social Security Number _____-___-_______

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
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</thead>
<tbody>
<tr>
<td>City, State</td>
<td>Zip Code</td>
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<tr>
<td>Day Phone</td>
<td>Evening Phone</td>
</tr>
<tr>
<td>Date of Birth*</td>
<td>Place of Birth*</td>
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<tr>
<td>Native Language</td>
<td>E-mail:</td>
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**Country of Citizenship**

If you are not a U.S. citizen, check the appropriate letter symbol to indicate type of visa expected upon matriculation at the College:

Resident - R _____ Parolee - P _____ Student-F _____ Exchange Visitor-J _____ Diplomat-A _____ Other _____

| What year do you wish to enter? | ☐ 2014 | ☐ 2015 | ☐ 2016 |
| What term do you wish to enter? | ☐ Fall | ☐ Spring | ☐ Summer |
| Which program are you interested in? | ☐ Standard MBA | ☐ MBA with Accounting Emphasis |
| Which format are you interested in? | ☐ Standard (2 years) | ☐ Intensive (1 year) | ☐ Not Sure |

*Florida Memorial University requires applicants pursuing master’s degrees in business administration to provide proof that they have taken the Graduate Management Admissions Test (GMAT).*

GMAT Graduate Management Admissions Test Score _________ Date taken: _________

Have you ever attended Florida Memorial University? ☐ No ☐ Yes If yes, when: ____________________________________________

Graduation date from Florida Memorial University: ____________________________

Under what Name ____________________________________________

What Major? ____________________________________________

On a separate sheet, submit an essay stating your goals for graduate study. Please submit one page typed.

*This information will not be used for discriminatory purposes*
Beginning with the most recent institution, list in chronological order college and universities attended, dates of attendance, major subject(s), and degree(s) received or expected. No action on this application will be taken until official transcripts of **ALL** academic work are received. You should immediately have an official transcript mailed directly to us from each institution attended.

<table>
<thead>
<tr>
<th>College or University/Major</th>
<th>Location/Degree</th>
<th>Month/Year of Attendance</th>
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<tbody>
<tr>
<td>1. Name:</td>
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<td>2. Name:</td>
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</tbody>
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What was your final cumulative undergraduate GPA (grade point average)? _______________________

List briefly your honors, academic and professional awards, fellowships and memberships and major activities.
____________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________

Name and address of current employer: ______________________________________________________________________________________________
____________________________________________________________________________________________________________________________

**OPTIONAL INFORMATION**

**Disclaimer:** The following is intended for use solely in connection with its voluntary or remedial efforts, is on a voluntary basis, will be kept confidential, will be used only in accordance with this provision, and refusal to provide this information will not subject the applicant to any adverse treatment.

How would you describe yourself? Please check one:

- [ ] Asian or Pacific Islander
- [ ] Black Hispanic
- [ ] Black or African-American
- [ ] Native American, Eskimo, or Aleut
- [ ] Black, Caribbean, Other
- [ ] White, Hispanic
- [ ] Other _______________________
- [ ] White, Caucasian, Non-Hispanic

**CERTIFICATION OF ACCURACY AND TRUTH**

I affirm that the information which I have provided on this application form, and any additional material that I submit related to the admission process, is complete and true to the best of my knowledge. I further understand that my admission and subsequent registration may be cancelled if information is found to be false or intentionally omitted. In applying, I agree, if accepted, to familiarize myself with the rules and regulations of Florida Memorial University, and to abide by them.

Signature of Applicant ____________________________________________________ Date___________________________

E-mail: MBA@fmuniv.edu
Website: www.fmuniv.edu