

PERSONAL INFORMATION

Please type or print in ink.

Mr.

Ms.

Dr.

_____ Last Name

_____ First Name

_____ Middle Name

Home

Address _____

_____ Phone () _____

_____ City

_____ State

_____ Zip Code

Please send correspondence to:

Home Business?

How long at current address? _____ Yrs. _____ Mos. (If less than 12 months, list address(es) with date(s) you lived at those residences to show residence for prior 12 months _____)

Check what you believe to be your residence classification for tuition purposes:

Texas Resident Non-resident Foreign

I have I have not resided in Texas for the prior twelve months. (This statement has no bearing on your application or the cost of the program. If admitted, a later determination of official residence may be required for internal university accounting purposes.)

Date of Birth _____

Social Security # _____

City/State/Country of Birth _____

Driver's License #/State _____

Expiration date _____

Are you a citizen of the United States? Yes No

Are you a permanent resident? Yes No If yes, please enclose a photocopy of your PR card front and back. If not, indicate type of visa held _____

In case of an emergency contact _____ Relationship _____ at _____

List three evaluators who will complete the letter or evaluation forms. Two should be from within your employing organization; one should be from the person to whom you report. Attach an additional sheet if necessary.

Name

_____ Last Name

_____ First Name

_____ Title

Company Name _____ Telephone () _____

Name

_____ Last Name

_____ First Name

_____ Title

Company Name _____ Telephone () _____

Name

_____ Last Name

_____ First Name

_____ Title

Company Name _____ Telephone () _____

I certify that all information and statements provided are, to the best of my knowledge, accurate and complete. I understand that all information provided will be held in strict confidence by The University of Texas at Dallas. Any items submitted in conjunction with this application will not be returned or transferred.

Signature _____ Date _____

EDUCATIONAL INFORMATION

In reverse chronological order, list all colleges, universities, and other educational institutions attended since secondary school.

Name and Location	Dates Attended	Major	Degree/Hrs. Earned	G.P.A.

List any awards, honors, distinctions, or scholarships you have received. Please indicate dates and institutions.

Please list any articles, books, technical reports or other works you may have published, as well as any patents received or pending. Do not include internal company or consulting reports.

Have you ever been on academic probation or been dismissed from any college or university Yes No
If yes, when?

Do you feel that your grades accurately reflect your abilities Yes No If no, please explain on a separate sheet of paper.

Have you ever applied for admission to The University of Texas at Dallas Yes No If yes, for admission in what semester and year _____. Were you accepted for admission Yes No

Did you subsequently register Yes No

Graduate Test Data (Optional)

Scores on the Graduate Management Admissions Test (GMAT) will be considered if submitted, but are NOT a requirement for admission.

GMAT Total Score _____ Verbal % _____ Quantitative %

Date GMAT taken / to be taken

The reporting code number for the GMAT for The University of Texas at Dallas is 6897.

Have you ever taken the GRE Yes No If yes, what were your scores:

Verbal % _____ Quantitative % _____ Analytical % _____

PERSONAL STATEMENT:

Attach a two to three page statement discussing your professional objectives, both long and short-term, and indicate how your past experiences have contributed to the definition of those objectives. Why do you want to pursue a graduate management degree at this point in your career?

EMPLOYMENT INFORMATION:

Please attach a current resume, job description, and organizational chart.

Current _____ Employer _____

If a subsidiary, what is the name of ultimate parent company _____

Address _____
City _____ State _____ Zip Code _____

Telephone () _____ Fax () _____ E-mail _____

Current Title _____ Type of Industry _____

Number of years of full-time work experience _____ Number of years in your current position _____

Number of people who report to you _____ Approximate number of employees in your organization _____

Name and title of person to whom you report _____

Describe your company. Include products/services, markets served, sales volumes, and/or total assets.

(If more space is required, please include additional information on a separate sheet.)

Please describe your current position, including reporting and budget responsibilities and assets you manage.

Please give your employment history in reverse chronological order, beginning with your present position. If your experience has been entirely with one company, indicate your major promotional sequence.

DATES	COMPANY	RESPONSIBILITY	TITLE OR POSITION
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(If more space is required, please list on a separate sheet.)

List any professional certifications you currently hold _____