

APPLICATION FOR MBA EXECUTIVES (EMBA)

PERSONAL INFORMATION

FULL NAME:

LAST *FIRST* *M.I.*

ADDRESS:

STREET ADDRESS *APARTMENT/UNIT #*

CITY *STATE* *ZIP*

HOME PHONE:

WORK PHONE:

CELL PHONE:

WORK FAX:

PERSONAL EMAIL:

WORK EMAIL:

PROFESSIONAL INFORMATION

COMPANY/ORGANIZATION:

ADDRESS:

STREET ADDRESS

CITY *STATE* *ZIP*

TITLE OR POSITION:

TOTAL YEARS WITH COMPANY:

TOTAL YEARS OF WORK
EXPERIENCE:

TOTAL YEARS OF
MANAGEMENT/PROFESSIONAL
EXPERIENCE:

IMMEDIATE SUPERVISOR'S
NAME:

LAST *FIRST* *M.I.*

IMMEDIATE SUPERVISOR'S
TITLE:

CURRENT ANNUAL SALARY

(CONFIDENTIAL/FOR STATISTICAL
PURPOSES ONLY)

EDUCATIONAL BACKGROUND

UNDERGRADUATE COLLEGE OR UNIVERSITY: _____

MAJOR: _____

DEGREE: _____ YEAR: _____

GRADUATE UNIVERSITY: _____

MAJOR _____

DEGREE: _____ YEAR: _____

PROFESSIONAL DESIGNATIONS: _____ YEAR: _____

NON-DEGREE PROGRAMS/COURSES: _____ YEAR: _____

APPLICANT ESSAYS

On separate sheets, please respond to the following:

1. Personal Statement (1 page – single-spaced).
 - What do you expect to accomplish through the MBA for Executives Program?
 - What learning experiences do you expect, and how will you apply them to your professional career?
 - What are your personal reasons for wanting to undertake this program of study?
2. Statement of Job Responsibility (2 pages – single-spaced)
 - Describe the organizational unit to which you are attached and relate it to the total organization in terms of size and scope of business.
 - Please give an accurate description of your position.
 - What is your scope of responsibility?
 - To what position do you report?
 - What is the scope and size of your profit-and-loss responsibility?
 - What are your management responsibilities with respect to staff?

OPTIONAL INFORMATION¹

Providing this information is voluntary. The information you choose to provide will be used in a nondiscriminatory manner, consistent with applicable civil rights laws, solely for required reporting under federal and /or state laws.

GENDER: MALE FEMALE

ETHNIC BACKGROUND:

AFRICIAN-AMERICAN

ASIAN-AMERICAN/PACIFIC INSLANDER

HISPANIC

NON-HISPANIC NATIVE-AMERICAN/ALASKAN NATIVE NON-HISPANIC WHITE

NON-U.S. CITIZEN

OTHER:

APPLICANT'S SIGNATURE

I certify that all statements made in this application for admission to the MBA Program for Executives (EMBA) at the Craig School of Business, California State University, Fresno are correct to the best of my knowledge. I realize that all documents submitted in support of this application become the property of the Craig MBA Program and California State University, Fresno. I understand and agree that any misrepresentation or omission of facts in my application will justify the denial of admission or the cancellation of admission and/or continuation in the EMBA.

SIGNATURE OF APPLICANT

DATE

¹California State University, Fresno and the Craig MBA Program will not discriminate in any employment practice, education program, or educational activity on the basis of race, color, religion, national origin, sex, age, disability, or veteran status. Our commitment to equal opportunity includes nondiscrimination on the basis of sexual orientation.



Craig School of Business

APPLICATION FOR MBA EXECUTIVES (EMBA)

RECOMMENDATION FORM

APPLICANT NAME:

LAST

FIRST

M.I

BUSINESS ADDRESS:

STREET ADDRESS

CITY

STATE

ZIP

APPLICANT: Please enter the information requested above and give this form to the individual you have asked to provide an evaluation as part of your application. The recommender should complete the form and return it to:

EMAIL: TOMBU@CSUFRESNO.EDU

OR

PROFESSOR TOM BURNS, MANAGER, EMBA
CALIFORNIA STATE UNIVERSITY FRESNO
5245 N. BACKER AVE MS PB7
FRESNO, CA. 93740

RECOMMENDER

Your assessment of the applicant will greatly assist the Admissions Committee in its decision. Recommendations are an important part of the application process and your time in furnishing this information is appreciated.

Recommendations are used for the admissions purpose only and do not become part of the permanent record file of the student upon matriculation. Applicants do not have access to their recommendations.

Please answer the following questions:

1. How long and in what capacity have you known the applicant?

2. What characteristics do you consider the applicant's principal talents or strengths?

3. In what areas can the applicant improve?

4. Using the chart below, please give us your personal appraisal of the applicant relative to others you have known in a similar capacity.

	Exceptional (Top 2%)	Outstanding (Top 5%)	Excellent (Top 15%)	Good (Top 33%)	Average (Mid 33%)	Below Average (Bottom 33%)	Not Observed
Intellectual Ability							
Motivation							
Ability to work with others							
Creativity and imagination							
Oral communication skills							
Written communication skills							
Quantitative Skills							
Analytical Skills							

Please describe briefly the reference group against which you are rating the candidate:

Please use the space below to make any additional comments concerning this applicant, particularly his/her aptitude for graduate work and a career in business management. If additional space is needed, please feel free

5. to use a separate sheet.

Overall Rating:

- Strongly Recommend
- Recommend
- Recommend with reservations
- Do not recommend

SIGNATURE

DATE

NAME (PLEASE PRINT OR TYPE):

LAST

FIRST

M.I

TITLE:

EMPLOYER:

BUSINESS ADDRESS:

STREET

CITY

STATE

ZIP

TELEPHONE:

EMAIL: