



# APPLICATION FOR ADMISSION

THE CORPORATE MBA PROGRAMS  
The University of Illinois at Chicago

## Part 1- please complete and submit

1) PLEASE INDICATE THE PROGRAM TO WHICH YOU ARE APPLYING:

- Banking
- Financial Markets
- International Management

2) YOUR NAME:

Mr. \_\_\_\_\_  
Ms. \_\_\_\_\_  
Family/Last (Surname) Given/First Middle

3) PLEASE INDICATE ANY NAME(S) YOU HAVE USED ON PREVIOUS ACADEMIC RECORDS THAT ARE DIFFERENT FROM ABOVE:

\_\_\_\_\_  
Family/Last (Surname) Given/First Middle

4) YOUR PERMANENT LEGAL HOME ADDRESS:

\_\_\_\_\_  
Street Address ( ) \_\_\_\_\_  
Area Code & Home Telephone Number  
\_\_\_\_\_  
City, State or Province, Zip or Postal Code, Country

5) YOUR CURRENT ADDRESS (IF DIFFERENT FROM ABOVE):

\_\_\_\_\_  
Street Address ( ) \_\_\_\_\_  
Area Code & Home Telephone Number  
\_\_\_\_\_  
City, State or Province, Zip or Postal Code, Country Valid until

6) DATE OF BIRTH:

\_\_\_\_\_  
Month / Date / Year

7) SEX:

- 1-Male
- 2-Female

8) E-MAIL:

CELL PHONE: ( ) \_\_\_\_\_  
Area Code & Cell Phone Number

9) ETHNICITY INFORMATION:

**Ethnic Identification (select one ONLY):**

- Hispanic or Latino
- Not Hispanic or Latino

**Racial Identification (select one or more groups as appropriate):**

- (1) Native American or Alaska Native
- (2) Asian
- (3) Black or African American
- (4) Native Hawaiian or Other Pacific Islander
- (5) White

10) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA?

YES If yes, please check one:

- BY BIRTH
- BY NATURALIZATION

NO If no, please check the appropriate blank (LPR, F or N) to indicate your current status:

- LPR = Legal Permanent Resident; please attach a copy of your Permanent Resident Card, Temporary Resident Card, or other CIS document.
- F = International:

Country of Citizenship \_\_\_\_\_  
Country of Birth \_\_\_\_\_

If on a visa, indicate current type and attach affidavit of financial support if form I-20AB or DS2019 is required: \_\_\_\_\_

N= Other. Please specify: \_\_\_\_\_

**11) ARE YOU A RESIDENT OF THE STATE OF ILLINOIS?**

YES                      If yes, for how long? \_\_\_\_\_ years, \_\_\_\_\_ months  
 NO  
 UNCERTAIN

**12) CHECK ONE AND COMPLETE THE APPROPRIATE INFORMATION:**

Name and permanent home address of:

- Parent(s)
- Spouse
- Legal Guardian
- Next of Kin, if none of the above

\_\_\_\_\_ Last (Surname)    First (Given)

\_\_\_\_\_ Street Address

\_\_\_\_\_ City, State or Province, Zip or Postal Code, Country

Telephone Number: \_\_\_\_\_  
*Country Code      Area Code      Phone Number*

**13) PLEASE LIST CHRONOLOGICALLY ALL COLLEGES, UNIVERSITIES AND OTHER INSTITUTIONS ATTENDED AFTER HIGH SCHOOL:**

Name of Institution	Location (City)	Dates of Attendance	Degree Conferred & Date	Major
		From: To:	Degree: Date:	
		From: To:	Degree: Date:	
		From: To:	Degree: Date:	
		From: To:	Degree: Date:	

**14) ARE YOU CURRENTLY ENROLLED AT A COLLEGE, UNIVERSITY OR OTHER EDUCATIONAL INSTITUTION?**

NO                       YES      If yes, name of institution: \_\_\_\_\_

**15) FOR APPLICANTS WHOSE NATIVE LANGUAGE IS NOT ENGLISH:**

Have you taken the (please circle) IELTS / TOEFL / TOEIC / Other (Please specify \_\_\_\_\_)?

YES      Please indicate date and score:                      Month \_\_\_\_\_      Year \_\_\_\_\_      Score \_\_\_\_\_

Have you included a copy of your score?       YES                       NO (If not, please forward)

NO      When do you plan to take the (please circle) IELTS / TOEFL / TOEIC / Other (Please specify \_\_\_\_\_)?      Month \_\_\_\_\_      Year \_\_\_\_\_

Do you plan to retake the (please circle) IELTS / TOEFL / TOEIC / Other (Please specify \_\_\_\_\_)?       NO       YES

If yes, when?                      Month \_\_\_\_\_      Year \_\_\_\_\_

**16) PLEASE READ THE FOLLOWING STATEMENT AND SIGN WHERE INDICATED:**

I hereby apply for admission to the University of Illinois at Chicago MBA Program and certify that all of the statements I am submitting are true and complete to the best of my knowledge. I also certify that I received no assistance or coaching in completing this application and the accompanying materials. I understand that withholding information requested on this application, including attendance at any other institution, or giving false information may make me ineligible for admission to the University or subject to dismissal. I have read the application instructions and application carefully and certify that the statements I made on this application are correct and complete, including a report of all college work attempted or completed. I understand that the application fee is non-refundable and that submitted materials are not returnable. I also agree to pay all reasonable collection costs, including attorney fees and other charges, necessary for the collection of any amount owed to the University that is not paid when due.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month                      Date                      Year