

APPLICATION FOR ADMISSION POST-MASTER'S ADVANCED BUSINESS CERTIFICATE

Have you previously applied for admission to Drexel University? Yes No If yes, when _____ / _____ / _____
Month Day Year

At what level? Undergraduate Graduate To which program did you apply? _____

PERSONAL DATA

Gender: Male Female Date of Birth _____ / _____ / _____ Social Security Number _____
Month Day Year

NAME

Last (Family) _____ First (Given) _____ MI _____

ADDRESS (Permanent/Legal)

Street _____

City _____ State _____ Zip _____ Country _____

Daytime Phone (_____) _____ Cell Phone (_____) _____

E-mail _____

PRESENT OCCUPATION

Company _____ Title _____

Description of duties _____

Total number of years of professional experience: _____

EDUCATION

Transcripts must be provided for each institution attended and submitted in a sealed envelope with the university seal over the flap.
(See information sheet for Post-master's Advanced Business Certificate (ABC) Program.)

School	Degree	Year	Field of Specialization
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I am registering for the ABC Program in (Specialization) _____

Term and year I wish to enroll (check one)

Fall (September) Winter (January) Spring (March/April) Summer (June) Year _____

Do you hold a professional certification requiring continuing education credits? Yes No

If yes, what is your certification? _____

What type(s) of continuing education credits are you required to earn? _____



CITIZENSHIP

Are you a citizen or permanent resident of the United States? Yes No

If no, what is your country of citizenship? _____ What is your country of birth? _____

If not a U.S. citizen or permanent resident, do you currently hold a U.S. visa? Yes No

If yes, what type of visa? (Example: A-1, B-1, F-1, F-2) _____

Note: If you are a permanent resident, you must enclose a photocopy of both sides of your alien registration card with your application. No financial documents are needed.

The following two questions are optional:

What is your ethnic origin? None Hispanic or Latino Not Hispanic or Latino

What is your race?

- American Indian or Alaskan Native
- Asian
- Black or African-American
- Chinese
- Cuban American
- Filipino
- Hispanic
- Indian
- Japanese
- Korean
- Mexican American
- Native Hawaiian or Other Pacific Islander
- Pakistani
- Puerto Rican American Commonwealth
- Puerto Rican American – Mainland
- Vietnamese
- White or Caucasian
- Other _____

DISCIPLINARY ACTION

Have you ever been the subject of a disciplinary action or investigation including, but not limited to: suspension, dismissal, expulsion, or denial of readmission at any high school, post-high school educational institution, college or university? Or, do you have any of these disciplinary or judicial actions pending or unresolved against you at any high school, post-high school educational institution, college or university?

Yes No

If you answered yes to this question you must submit an explanation describing the disciplinary action taken against you on a separate piece of paper.

Have you ever been convicted* of a crime (including, without limitation, any crime involving violence, alcohol, or drugs), felony, or misdemeanor or do you currently have any criminal charges pending or unresolved against you in any court? Yes No

If you answered yes to this question you must submit an explanation describing the disciplinary action taken against you on a separate piece of paper.

**Note: Conviction includes judgment, found guilty by a judge or jury, pleaded guilty or nolo contendere, received probation without verdict, disposition in lieu of trial, or ARD. If you answered yes to this question you must submit an explanation describing the criminal charges filed against you on a separate piece of paper.*

GOALS STATEMENT

Please inform the Admissions Committee about your purposes in applying to the program. Address such things as special interests you hope to pursue, special knowledge or experience you can bring to the program, and the program's place in your career goals.

SIGNATURE

I certify that the information on this application is complete and correct, and I understand that the submission of false information is grounds for denial of my application, withdrawal of any offer of acceptance, cancellation of enrollment, or appropriate disciplinary action. I authorize the University to verify the information I have provided. I agree to notify the proper officials of the institution of any changes in the information provided.

Applicant's signature _____ Date _____ / _____ / _____
Month Day Year