

Event Management Certificate Program

SECTION I: Your application will be reviewed when the following materials have been received:

- Completed Application Form
- Non-refundable application fee of \$50 payable to "USM School of Business"
- Official transcripts, or copies of official transcripts, from all colleges or universities that granted prior degree(s)
- Current resume

Submit all materials to:

USM School of Business
Event Management Certificate Program
PO Box 9300
Portland, Maine 04104

**Event Management Certificate Program
APPLICATION FORM**

SECTION II:

1. Name: _____
 Last First Middle (Dr., Mr., Mrs., Miss.)

2. Other names in which University records have previously been filed: _____

3. Current mailing address: _____
 Street City St. Zip

4. Permanent mailing address (if different): _____

5. Date of birth: _____ 6. Citizen of (country): _____

7. If U.S. citizen, state of legal residency: _____ 8. Gender (*optional*): _____

9. Home/Cell phone: _____ 10. Work phone: _____

11. Email: _____

12. Social Security Number: _____ 13. USM student ID: _____

14. Semester and year to begin coursework: Fall Spring Year: _____

15. Anticipated completion of coursework: Fall Spring Year: _____

16. Please list all degrees previously awarded. For each, include the name of the degree(s), the institution, and date awarded. Please submit an official transcript, or copies of an official transcript, from the college or university that granted degree(s).

17. Please indicate if you are one of the following (*optional*):

- | | | |
|---|--|---|
| <input type="radio"/> American Indian or Alaskan Native | <input type="radio"/> Asian | <input type="radio"/> Black (non-Hispanic) |
| <input type="radio"/> Hispanic | <input type="radio"/> Native Hawaiian/Other Pacific Islander | <input type="radio"/> White <input type="radio"/> Other |

18. How did you hear about the RMI Certificate Program?

- | | | |
|--|--|------------------------------|
| <input type="radio"/> USM Continuing Education Catalog | <input type="radio"/> School of Business Website | <input type="radio"/> Friend |
| <input type="radio"/> Employer: _____ | <input type="radio"/> Other: _____ | |

SECTION III:

19. Please submit a current resume with this application that contains information on all employment within the last five years. Please include a brief description of each job and your responsibilities.

Please note: Acceptance to this certificate program through the University of Southern Maine School of Business does not constitute acceptance into any of USM's degree programs. Should you wish to enroll in a degree program at USM, you must submit a separate application. Please contact the Office of Undergraduate Admission at 1-800-800-4USM or visit www.usm.maine.edu/admit for more information.

By my signature, I certify that to the best of my knowledge and belief, the information provided in this application is correct and complete and I agree to provide substantiation or documentation if requested by the University.

Signature: _____ Date: _____

The University of Southern Maine shall not discriminate on the basis of race, color, religion, sex, sexual orientation, national origin, or citizenship status, age, disability, or veteran's status in employment, education, and all areas of the University. The University provides reasonable accommodations to qualified individuals with disabilities upon request. Questions and complaints about discrimination in any area of the University should be directed to the campus compliance officer, 7 College Avenue, 780-5094, TTY, 780-5646.