

Master of Business Administration Application for Admission  
to the Graduate Division

**VALPARAISO UNIVERSITY**

C o l l e g e   o f   B u s i n e s s   A d m i n i s t r a t i o n



## APPLICATION MATERIALS CHECKLIST:

- Letter of application including a statement of professional goals.
- Completed and signed Master of Business Administration Application for Admission
- \$30.00 Application Fee
- Official undergraduate and/or graduate transcripts.
- GMAT scores. Valparaiso's GMAT institution code is 1874.
- Two letters of recommendation.

Please request that all transcripts, test scores, and letters of recommendation be sent directly to:

**Office of Graduate Studies  
Valparaiso University  
116 Kretzmann Hall  
Valparaiso Indiana 46383-6493**

## I. ENROLLMENT INFORMATION

Planned initial enrollment date:  Fall 1  Fall 2  Spring 1  Spring 2  Summer 1  Summer 2

Enrollment plan:  Full-time student  Part-time student

To which program are you applying?  MBA  MBA with Accounting Specialization  JD/MBA

Have you previously applied for admission to Valparaiso University?  No  Yes, if yes when \_\_\_\_\_

If yes, to what College?  Arts and Sciences  Nursing  Engineering  Business  Law  Graduate

Have you previously enrolled at Valparaiso University?  No  Yes, if yes when \_\_\_\_\_

## II. PERSONAL INFORMATION

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Last Name	First Name	Middle Initial	Previous Name
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Social Security Number	Email Address
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Mailing Address: Street	City	State	Zip
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Telephone: Home	Work
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Citizenship\*

\*International students must submit the International Supplement in addition to their Application for Admission.

### III. EDUCATIONAL BACKGROUND

Please list all colleges and universities previously attended, beginning with the most recent.

Institution Name	Location (City, State)	Dates Attended	Degree Received

Official transcripts must be submitted directly from the institution to the Valparaiso University Office of Graduate Studies.

Have you ever been placed on probation or dismissed by any college, university, or professional school for any reason?

No  Yes, please attach explanation.

### IV. EMPLOYMENT INFORMATION

Please list work experience, beginning with the most recent.. Inclusion of a current resume is encouraged..

Company Name	Location (City, State)	Dates of Employment	Title

Are you eligible for tuition assistance through your employer?  No  Yes  Not Certain

### V. LETTERS OF RECOMMENDATION

Two letters of recommendation are required of all applicants. Please list the name of each reference below:

Name	Business/Institution	Title	Phone Number

## VI. OPTIONAL INFORMATION

Please list names and relationships of your relatives who have attended or are now attending Valparaiso University.

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Name	Relationship	Years Attended	Program
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Name	Relationship	Years Attended	Program
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Please list the following:

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Spouse's Name	Address	Occupation
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How did you learn about Valparaiso University's Master of Business Administration Program? (check all that apply)

- College Adviser    Heard from Valpo Alumni    Professor    Recruiter    Relative/Friend    Religious Organization  
 Printed Material    Reference Material/Guidebooks    Internet Site    Graduated from Valparaiso University  
 Other \_\_\_\_\_

Please list other Master of Business Administration Programs to which you are applying.

Please order the factor(s) (1= most important) that will affect your choice for graduate school (rank all that apply).

Reputation \_\_\_\_ Accreditation \_\_\_\_ Program of Study \_\_\_\_ Cost/Value Ratio \_\_\_\_ Location \_\_\_\_

Other \_\_\_\_\_

The following optional information is used for statistical purposes only.

Date of Birth \_\_\_\_\_ Gender    Male    Female

Ethnic Background:    Asian    American Indian/Alaskan    Black/African American    Hawaiian/Pacific Islander  
 Hispanic/Latino    Mexican American    Puerto Rican    White/Caucasian    Other    Multiracial

Are you an active member of a church?

- No, list religious preference \_\_\_\_\_  
 Yes, list denomination \_\_\_\_\_

## VII. SIGNATURE (REQUIRED)

"I submit this application as a true and complete statement of facts for your consideration."

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Signature of Applicant

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Date



# RECOMMENDATION FORM

VALPARAISO UNIVERSITY

### APPLICANT:

Please complete this section and give this form to the person making the recommendation, together with a stamped, pre-addressed envelope.

**Applicant's Name** (print): \_\_\_\_\_

**Academic Program** (print): \_\_\_\_\_

**Recommender's Name** (print): \_\_\_\_\_

*The Family Education Rights and Privacy Act (20 U.S.C. 1232g) provides you with a right of future access to this recommendation once enrolled as a student. The Act also allows you to waive the right to access, but prohibits the Office of Graduate Studies from requiring you to waive this right as a condition of admission or review and evaluation of an application for admission. If you waive your right to inspect this document, have your recommender enclosed the recommendation in a business envelope, seal, and sign across the back flap before returning it to you or the Office of Graduate Studies.*

Please select one of the following options and sign: I hereby  **waive**  **do not waive** my right.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### TO THE PERSON COMPLETING THIS RECOMMENDATION FORM:

The above named person has applied for admission to Graduate Studies at Valparaiso University. Your comments and candid evaluation will greatly assist the Office of Graduate Studies in deciding the extent to which the applicant will benefit from and contribute to the Graduate Program. We sincerely appreciate the time that you take to provide us with your comments.

#### SEND RECOMMENDATION FORM TO:

The Office of Graduate Studies, Kretzmann Hall Room 116, 1700 Chapel Drive, Valparaiso University, Valparaiso, IN 46383.

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### II. Please rate the applicant's abilities in comparison with others you have known at comparable stages of their careers.

	Outstanding	Above Average	Average	Below Average	Cannot Assess
Academic Potential					
Motivation for Graduate Study					
Independence of Thought					
Judgment/Maturity					
Creativity/Resourcefulness					
Character					
Ability to Work with Others					
Oral Communication					
Written Communication					

**III. We would appreciate additional comments. Please use the spaces below or separate sheet(s) of paper.**

A. Please describe what you consider to be the candidate's greatest strengths.

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B. Please describe areas in which the candidate would benefit from improvement.

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C. Additional observations about the candidate that could have a bearing on the candidate's ability to succeed in graduate study at Valparaiso University.

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D. I recommend this candidate highly. \_\_\_\_\_  
I recommend without reservation. \_\_\_\_\_  
I recommend with reservation. \_\_\_\_\_  
I do not recommend this candidate. \_\_\_\_\_

(Please indicate, if possible, the nature of your reservations. Use a separate sheet of paper if necessary.)

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**If you have questions about this form or other matters that you wish to discuss, feel free to contact the Dean of Graduate Studies (219-464-5313; 800-821-7685).**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Institution:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_ City State Zip

**Phone:** (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Work Home



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**Title:** \_\_\_\_\_ **Institution:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_ City State Zip

**Phone:** (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Work Home