

# LE MOYNE

SPIRIT. INQUIRY. LEADERSHIP. *JESUIT.*

Application for  
Graduate Admission



DIVISION OF MANAGEMENT • MBA PROGRAM

# APPLICATION **MBA PROGRAM**

## INSTRUCTIONS FOR COMPLETION

An MBA candidate may take as many as two courses (six credits) as a nonmatriculated student. A third course will not be permitted until matriculation is awarded. Therefore, an MBA candidate should fulfill all matriculation requirements before registering for a third course. Before registering for courses, an applicant must schedule an advising appointment with the MBA program director. Course selection will be discussed and course waivers will be granted, if applicable.

### APPLICATION DEADLINES

The MBA program follows a rolling admission policy within the following deadlines:

**July 1** – Fall matriculation      **November 1** – Spring matriculation      **April 1** – Summer matriculation  
**March 15** – The 150-hour Accounting MBA deadline (available only to Le Moyne College accounting students)

### ADMISSION NOTIFICATION

Admission notification will be made by official letter within two weeks of the completed application process.

### APPLICATION CHECKLIST

All application materials must be submitted in one packet to the Office of Graduate Admission. The following are required for application completion:

- \_\_\_\_\_ **Completed Application**
- \_\_\_\_\_ **Official Graduate Management Admission Test (GMAT) report** — Please have report sent directly to Le Moyne College.
- \_\_\_\_\_ **Official Transcripts** — Send one sealed official transcript from all undergraduate and graduate colleges and/or universities attended. If a school's policy prohibits sending transcripts directly to students, please request that they be sent to the Office of Graduate Admission at Le Moyne College.
- \_\_\_\_\_ **Two Letters of Recommendation** — Submit the form to two professionals and/or academic advisors who can attest to your ability to be successful in a graduate program. Please have them sign over the sealed back of the envelope before sending the letters of recommendation to you.
- \_\_\_\_\_ **Résumé**
- \_\_\_\_\_ **Advising Appointment** — Schedule an advising appointment with the MBA program director.  
Date of appointment: \_\_\_\_\_ .

### INTERNATIONAL APPLICANTS

A Test of English as a Foreign Language (TOEFL) score report is required of non-native English speaking applicants. International applicants must have transcripts showing that a bachelor's degree equivalent to one in the United States has been earned.

In order to qualify for the Certificate of Eligibility (Form I-20), students must be admitted into the program full time and provide proof of sufficient funding for at least the first year of graduate study. To do so, students need to complete the Le Moyne College International Student Financial Statement for Graduate Students.

### COMPLETED APPLICATION PACKET

Please send completed application packet to:

Office of Graduate Admission  
Attn: MBA Program  
Le Moyne College  
Reilly Hall 342  
1419 Salt Springs Road  
Syracuse, NY 13214-1301  
**Phone:** (315) 445-5444  
**Fax:** (315) 445-6027  
**E-mail:** GradAdmission@lemoyne.edu

**Note:** New York state law requires all students to submit immunization records before registering for courses. Please find instructions, the Immunization Record and the Meningococcal Meningitis Vaccination Response forms at [www.lemoyne.edu/health\\_center](http://www.lemoyne.edu/health_center). If you have questions, please contact Student Health Services at (315) 445-4440.

#### PERSONAL DATA

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Social Security # \_\_\_\_\_ Date \_\_\_\_\_

Legal Name (Last, First, Middle) \_\_\_\_\_ Other Name, if Applicable \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ (Evening) (\_\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Date of Birth Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  Female  Male

Do you consider yourself to be Hispanic/Latino?  Yes  No

In addition, select one or more of the following racial categories to describe yourself:

- American Indian or Alaska Native  Native Hawaiian or Other Pacific Islander  
 Asian  White  
 Black or African American

#### Citizenship

- U.S. citizen  
 Dual U.S. citizen; please specify other country of citizenship \_\_\_\_\_  
 U.S. permanent resident visa, citizen of \_\_\_\_\_  
 Other citizenship \_\_\_\_\_

Do you need an I-20 issued by Le Moyne College?  Yes  No

How did you hear about the MBA program at Le Moyne College? (Please check all that apply.)

- |   |  |
|---|--|
| <input type="checkbox"/> Attendance at a specialized graduate forum/fair (city) _____ | <input type="checkbox"/> Alumnus/a (name) _____  |
| <input type="checkbox"/> Visit to Le Moyne College                                    | <input type="checkbox"/> Faculty member at your undergraduate school                     |
| <input type="checkbox"/> Open house   | <input type="checkbox"/> Placement/career counseling office at your undergraduate school |
| <input type="checkbox"/> Poster advertising the graduate programs                     | <input type="checkbox"/> Employer  |
| <input type="checkbox"/> College listing in Peterson's Guide                          | <input type="checkbox"/> Friend/family member/co-worker                                  |
| <input type="checkbox"/> College listing (guide) _____                                | <input type="checkbox"/> General reputation of the program                               |
| <input type="checkbox"/> Letter from the program                                      | <input type="checkbox"/> Le Moyne College Web site                                       |
| <input type="checkbox"/> Printed ad (what publication) _____                          | <input type="checkbox"/> Another Web site  |
|   | <input type="checkbox"/> Other _____   |

#### ACADEMIC PLAN

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I am applying for the following semester  Fall  Spring  Summer Year \_\_\_\_\_

I plan to study  Full time (enrolled in nine credits or more)  Part time

I am currently an accounting student in my junior year at Le Moyne College and am applying to the 150-hour Accounting MBA program

## ACADEMIC HISTORY

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List below the colleges from which you graduated and other college(s) you have attended. All college-level work must be included. You must request that each of these institutions send official transcripts to you for inclusion in your application packet. If a school's policy prohibits sending transcripts directly to students, please ask the school to send them to the Office of Graduate Admission at Le Moyne College.

Institution (State, Country)	Dates Attended	Major Field	Degree Earned	Check if non-degree	Date Awarded	GPA (4.0 scale)

Have you ever been found responsible for a disciplinary violation at an educational institution you have attended from ninth grade (or international equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in your probation, suspension, removal, dismissal or expulsion from the institution?  No  Yes

Have you ever been convicted of a misdemeanor, felony or other crime?  No  Yes

If you answered yes to either or both questions, please attach a separate sheet that gives the approximate date of each incident and explanation of the circumstances.

## RECORD OF CURRENT OR MOST RECENT EMPLOYMENT

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Current or Most Recent Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Dates of Employment \_\_\_\_\_

Employer Address \_\_\_\_\_

Does your employer provide tuition benefits?  No  Yes

## REFERENCES

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Please list the names of two professional and/or academic references who can attest to your ability to be successful in a graduate program.

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_

2. Name \_\_\_\_\_ Relationship \_\_\_\_\_

Are you eligible to receive veteran benefits?  No  Yes

Do you have any disabilities that need to be taken into consideration concerning accommodations for instruction and/or use of facilities at the College?  Yes  No

If yes, please specify. \_\_\_\_\_

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## STATEMENT OF PURPOSE

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Please write a brief essay stating, as specifically as possible, your educational and career goals. Indicate what you plan to accomplish by enrolling in the MBA program at Le Moyne College. (Attach additional pages if necessary.)

I certify that the information I have provided on this application is correct and complete. I understand that withholding information on this application or giving false information will make me ineligible for admission.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

*(Your signature is necessary in order to process your application.)*

# LE MOYNE COLLEGE

## RECOMMENDATION FORM MASTER OF BUSINESS ADMINISTRATION

**To the Applicant:** This form should be given to two professional colleagues, preferably one of whom can speak to your academic abilities and the other to your professional abilities as evidence of your qualifications for graduate study.

### TO BE COMPLETED BY APPLICANT

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Name (First, MI, Last) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (H) (\_\_\_\_) \_\_\_\_\_ (W) (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

In accordance with the Family Educational Rights Privacy Act of 1974, please check one:  I do  I do not waive my right to read this recommendation.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Name of Evaluator \_\_\_\_\_

### TO BE COMPLETED BY EVALUATOR

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Name (First, MI, Last) \_\_\_\_\_

Organization \_\_\_\_\_ Job Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

How well do you know the applicant?  Very Well  Well  Somewhat

In what capacity have you known the applicant? \_\_\_\_\_

#### Personal and Professional Appraisal:

Please check the category that best indicates your evaluation of the applicant in terms of the listed characteristics.

Characteristics	Superior	Above Average	Average	Below Average	No Basis for Evaluation
Academic Potential					
Leadership Ability					
Professional Competence					
Sense of Honesty and Integrity					
Ability to Work and Cooperate with Others					
Time Management Skills					
Ability to Work Independently					
Reliability					
Oral Communication Skills					
Written Communication Skills					
Problem Solving Skills					



In the space below, please explain your recommendation and provide a brief assessment of the applicant's ability to successfully complete graduate study. Please use additional space if necessary. (Optional for faculty recommending Le Moyne College accounting students applying to the 150-hour Accounting MBA program.)

Recommendation based on applicant's ability to pursue graduate study:

Strongly recommend       Recommend       Recommend with reservations       Do not recommend

To the evaluator: Please return this recommendation within one week to the person requesting your assistance in a sealed envelope, with your signature across the envelope seal.

Signed \_\_\_\_\_ Date \_\_\_\_\_

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Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (H) (\_\_\_\_) \_\_\_\_\_ (W) (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

In accordance with the Family Educational Rights Privacy Act of 1974, please check one:  I do  I do not waive my right to read this recommendation.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Name of Evaluator \_\_\_\_\_

### TO BE COMPLETED BY EVALUATOR

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Name (First, MI, Last) \_\_\_\_\_

Organization \_\_\_\_\_ Job Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

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Ability to Work Independently					
Reliability					
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Written Communication Skills					
Problem Solving Skills					



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Strongly recommend       Recommend       Recommend with reservations       Do not recommend

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Signed \_\_\_\_\_ Date \_\_\_\_\_

## DIVISION OF MANAGEMENT MISSION STATEMENT

The Division of Management at Le Moyne College strives for excellence through a carefully constructed business core curriculum and selected majors that provide a strong grounding in broad-based fundamental business knowledge and skills to prepare students for meaningful and productive careers as managers and professionals.

## LE MOYNE COLLEGE MISSION STATEMENT

Le Moyne College is a diverse learning community that strives for academic excellence in the Catholic and Jesuit tradition through its comprehensive programs rooted in the liberal arts and sciences. Its emphasis is on education of the whole person and on the search for meaning and value as integral parts of the intellectual life. Le Moyne College seeks to prepare its members for leadership and service in their personal and professional lives to promote a more just society.

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## OFFICE OF GRADUATE ADMISSION Attn: MBA Program

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**Reilly Hall 342**  
**1419 Salt Springs Road**  
**Syracuse, NY 13214-1301**  
**PH: (315) 445-5444**  
**FAX: (315) 445-6027**  
**GradAdmission@lemoyne.edu**

*Le Moyne College is an affirmative action/equal opportunity employer and equal opportunity institution.*

**NONDISCRIMINATION STATEMENT** Le Moyne College is an Affirmative Action/Equal Opportunity Employer, and does not discriminate on the basis of race, color, gender, creed, age, disability, marital status, sexual orientation, veteran status, or national or ethnic origin. For more information visit [www.lemoyne.edu/compliance](http://www.lemoyne.edu/compliance).