

SUPPLEMENTAL APPLICATION FOR ADMISSION TO GRADUATE STUDY IN BUSINESS AT THE UNIVERSITY OF OKLAHOMA

THE UNIVERSITY OF OKLAHOMA
COLLEGE OF BUSINESS ADMINISTRATION
OFFICE OF GRADUATE PROGRAMS
307 West Brooks, Room 105K
Norman, Oklahoma 73019-0450
Phone: (405) 325-4107
FAX: (405) 325-7753
<http://price.ou.edu/gradprog>

STUDENT INFORMATION

APPLICANT'S NAME (LAST, FIRST, MIDDLE) _____

SOCIAL SECURITY NO. _____

BIRTHDATE (MONTH, DAY, YEAR) _____

MR.

OR
OU STUDENT ID NUMBER _____

MS.

STUDENT MAILING ADDRESS _____

AREA CODE _____

TELEPHONE _____

STUDENT PERMANENT ADDRESS _____

AREA CODE _____

TELEPHONE _____

STUDENT E-MAIL ADDRESS _____

AREA CODE _____

TELEPHONE _____

1. RESIDENT OF OKLAHOMA 2. NON-RESIDENT OF OKLAHOMA - STATE _____ 3. NON - RESIDENT OF THE USA - COUNTRY _____

THE FOLLOWING INFORMATION IS VOLUNTARY AND IS REQUESTED FOR REPORTING PURPOSES ONLY:

WHICH GROUP BEST DESCRIBES YOU?

1. WHITE 2. BLACK 3. HISPANIC 4. ASIAN / PACIFIC ISLANDER 5. AMERICAN INDIAN OR ALASKAN NATIVE 6. INTERNATIONAL - PLEASE LIST COUNTRY _____

MARITAL STATUS: ARE YOU MARRIED? YES NO

PROGRAM OF INTEREST

Master of Business Administration

[Major Code: 0506M]

MS in MIS

[Major Code: 0521M]

Joint BBA/

Master of Accountancy

[Major Code: 0502Q]

Master of Accountancy

[Major Code: 0502M]

Doctor of Philosophy

[Major Code: 0506R]

with a major in:

___ Accounting

___ Finance

___ Management

___ Management Information Systems

___ Marketing / Supply Chain Management

Dual Degree Programs*

MBA/Juris Doctor

[Major Code: MBA 4940R]

Generic Dual Degree

[Major Code: 4952M]

*Please specify the dual degree you are seeking:

Degree #1: _____

Degree #2: _____

*Applicants must make separate application and satisfy admission, course and examination requirements of both programs

EXPECTED ENROLLMENT

Fall 20 _____

Spring 20 _____

Summer 20 _____

HAVE YOU APPLIED TO THIS
GRADUATE COLLEGE BEFORE?

Yes

No

WERE YOU
ADMITTED?

Yes

No

DATE _____

WERE YOU
ENROLLED?

Yes

No

ENROLLMENT STATUS

Full-time

Part-time

Undecided

THE GRADUATE MANAGEMENT ADMISSION TEST IS REQUIRED FOR ALL PROGRAMS

I have taken the GMAT on _____ (DATE)

SCORE IF will be sent
TAKEN

I plan to take the GMAT on _____ (DATE)

has been sent _____ (DATE)

FOR INTERNATIONAL STUDENTS

DATE ON WHICH
YOU WILL (OR DID)
TAKE TOEFL

IF YOU WISH TO BE CONSIDERED FOR A GRADUATE AWARD, CHECK APPROPRIATE BOX OR BOXES

Teaching Assistantship

Research Assistantship

Scholarship

Minority Scholarship

LIST IN CHRONOLOGICAL ORDER ALL COLLEGES AND UNIVERSITIES ATTENDED

NAME AND LOCATION OF INSTITUTION	MONTH AND YEAR OF ATTENDANCE	MAJOR	DEGREES RECEIVED, DATE, GRADE POINT AVERAGE

LIST NON-ACADEMIC ACTIVITIES, INCLUDING EMPLOYMENT AND MILITARY SERVICE

EMPLOYER	KIND OF WORK	INCLUSIVE DATES

PLEASE INDICATE ALL FELLOWSHIPS, SCHOLARSHIPS, AND OTHER HONORS YOU HAVE RECEIVED

LIST ACADEMIC AND PROFESSIONAL ORGANIZATIONS TO WHICH YOU BELONG

Please provide the name, address, and title of each individual from whom you have requested a letter of recommendation.

NAME	ADDRESS	POSITION

I hereby certify that the information given by me on this application is complete and accurate

APPLICANT DATE