



# Application Form

**Thank you for your interest in the FMU MBA Program.**

Please provide the following information:

**Term applying for:**  Spring 20\_\_  Late Spring 20\_\_  Fall 20\_\_

**Are you:**

New student applying for:

Masters of Business Administration (1220)

Master of Business Administration-Healthcare Executive Management Concentration (1222)

Transient Student (taking courses to apply toward work at another institution). You must include appropriate documentation from your university's registrar in a sealed envelope.

Other institution: \_\_\_\_\_

Requested Course(s) \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Any other name on record: \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Social Security Number: *required if accepted* \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
Number and Street City State Zip

Phone (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Current Address: \_\_\_\_\_  
(If different from permanent) Number and Street City State Zip

### Academic Information

College/University Granting Undergraduate Degree: \_\_\_\_\_

Degree Earned: \_\_\_\_\_ Date of Graduation: \_\_\_\_/\_\_\_\_/\_\_\_\_ Major: \_\_\_\_\_  
month year

Have you earned a GRADUATE degree?  no  yes

If yes: Degree \_\_\_\_\_ Date of graduation: \_\_\_\_/\_\_\_\_/\_\_\_\_  
month year

Institution Granting Graduate Degree: \_\_\_\_\_





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U.S. Citizen?  Yes  No Dual U.S.?  Yes  No

Alien Registration number \_\_\_\_\_ (submit copy of Green Card)

Foreign Citizen\* Country of Citizenship \_\_\_\_\_

\*Visa Type (please select one):

<input type="checkbox"/> A-1	<input type="checkbox"/> A-2	<input type="checkbox"/> E-2	<input type="checkbox"/> F-1	<input type="checkbox"/> G-1	<input type="checkbox"/> G-2	<input type="checkbox"/> G-3	<input type="checkbox"/> G-4
<input type="checkbox"/> H-1A	<input type="checkbox"/> H-1B	<input type="checkbox"/> H-2A	<input type="checkbox"/> H-2B	<input type="checkbox"/> H-3	<input type="checkbox"/> H-4	<input type="checkbox"/> J-1	<input type="checkbox"/> K-1
<input type="checkbox"/> K-2	<input type="checkbox"/> L-1	<input type="checkbox"/> L-2	<input type="checkbox"/> N-8	<input type="checkbox"/> N-9	<input type="checkbox"/> Other (please specify)		

How long have you resided in South Carolina? Years \_\_\_\_\_ Months \_\_\_\_\_

State of previous residency \_\_\_\_\_

If you moved to South Carolina during the past five years, what prompted your move to this state?  
 Education  Employment  Other \_\_\_\_\_

List addresses where you have lived for more than 30 days during the past 48 months. Begin with the most current address. \_\_\_\_\_

From: (month/yr)	To: (month/yr)	Address (City, State, Zip Code)
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From: (month/yr)	To: (month/yr)	Address (City, State, Zip Code)
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List the employer of the person on whom you are basing your claim for residency:

Employer name \_\_\_\_\_ Phone number (\_\_\_\_) \_\_\_\_\_

City/State \_\_\_\_\_

Are you registered to vote in the U.S.?  Yes  No If yes, what state? \_\_\_\_\_

Are you licensed to drive in the U.S.?  Yes  No If yes, what state and date of issue? \_\_\_\_\_

Is a motor vehicle registered in your name?  Yes  No If yes, what state and date of issue? \_\_\_\_\_

## Campus Safety Standards

A "yes" answer to one or more of the following questions will not necessarily preclude your admittance. However, failure to provide complete and accurate information will be grounds to deny admission, withdraw admission, or enact disciplinary sanctions after enrollment. For the purpose of responding to these questions, "crime" or "criminal charge" refers to any crime other than a traffic-related misdemeanor or infraction. Include all alcohol or drug offenses whether or not they are traffic-related.

1. Have you ever been convicted of a criminal offense or otherwise accepted responsibility for the commission of a crime?  Yes  No

2. Are there criminal charges pending against you at this time?  Yes  No

3. Have you ever entered a plea of guilty, a plea of no contest, a plea of *nolo contendere*, or an Alford plea in response to a criminal charge?  Yes  No

4. Have you ever been dismissed, suspended, or placed on probation by any school, college or university for reasons other than academic performance?  Yes  No

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5. Have you ever received a military discharge of any type other than an honorable discharge? \_\_\_ Yes \_\_\_ No

**If you answered “yes” to any of the five questions above, please explain the circumstances in a typed letter (providing details such as dates and locations) and describe your commitment to responsible behavior and good campus citizenship. Your name and contact information should be included at the top of the letter.**

*You must promptly notify the Office of Graduate Admissions in writing of any criminal charge, any disposition of a criminal charge, or any school, college or university disciplinary action against you, or any type of military discharge other than an honorable discharge that occurs at any time after you submit this application. Your failure to do so will be grounds to deny or withdraw your admission or make you subject to disciplinary sanctions after enrollment.*

Please make sure you have completed every item on this section and have provided the required explanations (if appropriate) before proceeding.

### To facilitate your application process:

**Application fee of \$39 (check payable to FMU)?**  included

**Official Transcripts:**  Included in sealed envelope(s) from institutions  Will be sent by institutions

**Official Test Scores:**  GMAT included  GRE included  Test to be taken by \_\_\_\_\_  
 Received a waiver  Will request a waiver by contacting the MBA Director

**Letter(s) of Recommendation:**  Included in sealed envelopes from reference  
 Will be mailed by reference

**Personal Statement:**  Included

### If international student:

- Financial statement  Included
- TOEFL Scores  Included

### Applicant Signature

The information provided in this application is complete and accurate to the best of my knowledge. I agree to accept the regulations set forth in the FMU Catalog regarding academic standing, attendance, personal conduct, and other matters. I realize that withholding information from or providing false information to the University could result in my application being rejected, my admission rescinded, or my dismissal from Francis Marion University.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

Francis Marion University follows all federal and state laws banning discrimination in public institutions of higher learning. Francis Marion adheres to all Title IX policies, and does not discriminate on the basis of race, color, sex, religion, ethnicity, national origin, age, sexual orientation, gender identity, veteran status or any other protected category under applicable local, state, or federal law. General questions regarding Title IX can be directed to the Office of Civil Rights ([www.ed.gov/ocr](http://www.ed.gov/ocr)). Specific questions may be referred to the University’s Title IX Coordinator ([titleixcoordinator@fmarion.edu](mailto:titleixcoordinator@fmarion.edu))

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