Application for Admission  
UC Irvine | The Paul Merage School of Business 2008

Program applying for: ________________________________

**PERSONAL DATA**

Name ________________________________
Surname (Family) First Middle

Male____ Female____ U.S. Social Security No. (required if available) __________

Name that you prefer to be called (first name only) ________________________________

Other names under which transcripts may be issued

Name ________________________________ Date of Birth __________
Surname (Family) First Middle
________________________
mm/dd/yyyy

Country of Citizenship ________________________________

Your Birthplace ________________________________
City State (USA) Country

**Permanent Home Address:**

Address Line 1 ________________________________

Address Line 2 ________________________________

City __________________ State __________________ Zip Code _______________ Country ________________

Home Phone (________) ___________________________ Cell Phone (________) ___________________________

If permanent state is California, which county? ________________________________

**Home Mailing Address (if different from above):**

Address Line 1 ________________________________

Address Line 2 ________________________________

City __________________ State __________________ Zip Code _______________ Country ________________

If mailing state is California, which county? ________________________________

**Contact Information: (This is critical and will be used as our primary contact information)**

Email address you would like us to contact you at ________________________________

Phone number where you would like us to contact you (_____) ___________________________

Country Code if outside U.S.

**Prior Graduate Student Status**

Have you ever applied for graduate status before at UCI? □ No □ Yes, Quarter and Year __________________

Which Program?

Have you ever enrolled as a graduate student at UCI? □ No □ Yes, Quarter and Year __________________

Which Program?

Are you currently enrolled in a graduate program at UCI? □ No □ Yes
Which Program?
RESIDENCY
Do you expect to be classified as a legal resident of California (refer to Section G of Instructions)?
☐ Yes  ☐ No

CITIZENSHIP
What Citizenship or Visa status do you expect to hold when the quarter begins?
☐ U.S. Citizen  ☐ F-1 (student)  ☐ J-1  ☐ H1/Work Visa  ☐ H4  ☐ Refugee
☐ U.S. Permanent Resident  ☐ J-2  ☐ Immigrant  ☐ Other (please specify) __________________________

ACADEMIC DATA

List all colleges, universities, and other educational institutions attended since high school, including those offering extension courses. (Please indicate the institution you are currently attending if applicable.) List completed Bachelor's degree first, then Master's degree (if applicable), then other institutions.

<table>
<thead>
<tr>
<th>Name of school, college, or university</th>
<th>Major</th>
<th>Date or expected date of conferral mm/yyyy</th>
<th>Location (city, state, and country)</th>
<th>School Code</th>
<th>Enrolled Start Date mm/yyyy</th>
<th>Enrolled End Date mm/yyyy</th>
<th>Title of degree conferred or to be conferred</th>
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<tbody>
<tr>
<td>1</td>
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<td>3</td>
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</tbody>
</table>

Academic information (Bachelor’s Degree only): GPA (last 2 years) _______ Overall GPA _______

Full Time applicants only: Have you taken Calculus and/or Statistics? ☐ Calculus  ☐ Statistics  ☐ Both
If so, at what institution(s)? ________________________________________________________________

Ph.D. ACADEMIC AREA
Ph.D. applicants only: Area to which you are applying (select only one): ________________________________________________

TEST SCORES
Have you taken the GMAT? ☐ Yes, Date mm/yyyy ☐ No
If yes, score? Verbal _____/_____%, Quantitative _____/_____%, A.W. _____/_____%, Total Score _______
Total Score ________ , Total Percentage _______
Do you plan to take/retake the GMAT? ☐ Yes, Date mm/yyyy ☐ No

Have you taken the GRE (Ph.D. only)? ☐ Yes, Date mm/yyyy ☐ No
If yes, score? Verbal _____/_____%, Quantitative _____/_____%, Analytical _____/_____% (if available)
Do you plan to take/retake the GRE? ☐ Yes, Date mm/yyyy ☐ No

Have you taken the TOEFL? (International applicants) ☐ Yes, Date mm/yyyy ☐ No; If yes, Score _______
Do you plan to take/retake the TOEFL? ☐ Yes, Date mm/yyyy ☐ No

Have you taken the TSE? ☐ Yes, Date mm/yyyy ☐ No; If yes, Score _______
Do you plan to take/retake the TSE? ☐ Yes, Date mm/yyyy ☐ No
WORK AND OTHER PROFESSIONAL EXPERIENCE

EMPLOYMENT
Fill out the section below using information from your current or most recent employer. In addition, upload a current resume, summarizing all relevant professional, post-baccalaureate work experience. Part-time positions, summer jobs and internships should only be included if they are relevant to your professional career progress. If there are gaps in your employment history, please include an explanation. EMBA/HCEMBA candidates: Please attach or upload a current organizational chart for your current position. (EMBA candidates are encouraged to also attach company information including size, scope, personnel, budget, and capital investment for which you are responsible.)

<table>
<thead>
<tr>
<th>Total years/months of professional, full time work experience</th>
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<tbody>
<tr>
<td>(Calculate to your anticipated date of entrance; do not include summer jobs)</td>
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<tr>
<td>Current or Most Recent Employer</td>
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<tr>
<td>Industry Code</td>
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<td>Desired Future Industry Code</td>
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<td>Location</td>
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<td>Job Title</td>
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<td>Work Phone</td>
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<td>Starting yearly salary ($US)</td>
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<tr>
<td>Ending or current salary ($US)</td>
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<td>Additional compensation (e.g. bonuses, car, commission, housing)</td>
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<tr>
<td>Nature of employer's activities</td>
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<tr>
<td>Number of full-time employees</td>
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<tr>
<td>Company's annual revenue ($US)</td>
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<tr>
<td>Number of years in existence</td>
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<td>Promotions(s) and dates received</td>
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<tr>
<td>Primary Responsibilities</td>
<td></td>
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<tr>
<td>Reason(s) for leaving (if applicable)</td>
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</table>

School, Civic and Professional Distinctions, Honors, Awards, and other Recognition of Achievement
Please indicate the basis of selection and date for each listing.

School, Civic and Professional Activities and Affiliations
(Please list in order of importance to you.)
<table>
<thead>
<tr>
<th>Activity</th>
<th>Dates of your involvement</th>
<th>Office or position held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>mm/yyyy to mm/yyyy</td>
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</table>

Hobbies and special interests


I understand that federal law provides me, after enrollment, with a right of access to my recommendation, and that no school or person can require me to waive this right.

I hereby □ waive □ do not waive my right of access to my recommendation.

Failure to complete and sign this section will be considered an expressed waiver of your rights to access your recommendation.

Please give the names, addresses, telephone numbers, positions, and organizations of the people you have asked to provide recommendations for you. (Only two recommendations are required for MBA applicants; three for Ph.D. applicants.)

a. Name ____________________________
   Title ______________________________
   Company/Organization ______________________________
   Address ______________________________
   Phone ________ ( ) ________ Email ______________________________

b. Name ____________________________
   Title ______________________________
   Company/Organization ______________________________
   Address ______________________________
   Phone ________ ( ) ________ Email ______________________________

c. Name (Ph.D. Only) ____________________________
   Title ______________________________
   Company/Organization ______________________________
   Address ______________________________
   Phone ________ ( ) ________ Email ______________________________

**MISCELLANEOUS DATA**

Other schools you have applied for admission (optional)? ______________________________

Will you be sponsored for MBA education by your company organization? □ Yes □ No

Company/Organization ______________________________

**Information Sources**

From which of the key sources did you learn about the Paul Merage School of Business MBA Program? (Please select all that apply)

<table>
<thead>
<tr>
<th>People</th>
<th>Internet</th>
<th>Printed Material</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Information Session</td>
<td>□ Merage Web Site</td>
<td>□ Merage Brochure</td>
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<tr>
<td>□ World MBA Tour</td>
<td>□ Princeton Review/Embark.com</td>
<td>□ Postcard</td>
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<tr>
<td>□ Inside the MBA</td>
<td>□ mba.com</td>
<td>□ LA Times</td>
</tr>
<tr>
<td>□ Faculty member(s)</td>
<td>□ On-line Advertisement, please specify</td>
<td>□ OC Register</td>
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<tr>
<td>□ Current student(s)</td>
<td>□ Other, please specify</td>
<td>□ Business Journal</td>
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<td>□ Alumni</td>
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<td>□ Guide Books</td>
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<tr>
<td>□ Friend(s)</td>
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<td>(Petersen's, Barron's, etc.)</td>
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<tr>
<td>□ Relative(s)</td>
<td></td>
<td>□ Physician or Medical Magazines, please specify</td>
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<tr>
<td>□ Other Person</td>
<td></td>
<td>□ Other, please specify</td>
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</tbody>
</table>

**Business School Rankings**

□ US News & World Report
□ Business Week
□ Wall Street Journal
□ Financial Times
□ Other, please specify
HONOR PLEDGE
I hereby certify that I have provided accurate information in this application. I further certify that the application and all essays are exclusively my own work and that no recommendations, transcripts, or supporting materials have been falsified. I am aware that any misrepresentation or omission of facts in my application will justify the denial of admission or the cancellation of admission.

I understand that materials received by the school in connection with this application become the property of the School. As such, all materials are subject to verification by the Admissions Committee and are not returnable.

Signature ___________________________________ Date __________________________

Print Name ____________________________________________
Confidential Recommendation on Applicant

PH.D. IN MANAGEMENT PROGRAM
THE UC IRVINE PAUL MERAGE SCHOOL OF BUSINESS
IRVINE, CA  92697-3125

Name of Applicant (please print) ____________________________________________

TO THE RECOMMENDER: When considering applicants to the Ph.D. Program, particular emphasis is placed on the comments from people the applicant has chosen as recommenders. The Admissions Committee typically finds that a recommendation which presents a balanced view of an applicant’s abilities and other attributes is most helpful to the applicant and to the Committee. Specific comments about significant attributes, whether positive or negative, are more useful than general statements. This form is intended to help you present information about the applicant. Please supplement it in whatever way you feel is appropriate.

Recommender’s name ____________________________________________ Telephone ( ___________ ) __________________________

Position/title ____________________________________________ at ____________________________________________

Address ____________________________________________ E-mail ____________________________________________

No. and Street ____________________________________________ City, State and Zip Code, or Country

1. During which period of time have you had the most frequent contact with the applicant? from ____________ to ____________

2. In what relationship? ____________________________________________

3. How often have you observed him/her at work?
   at school?
   socially?
   Daily Weekly Monthly Rarely Never

4. Please comment on the applicant’s academic preparation and abilities (both positive and negative).

5. Please discuss the applicant’s commitment to, and potential for, a career in scholarly research and teaching.

TO THE APPLICANT: I understand that federal law provides me, after enrollment, with a right of access to this recommendation, and that no school or person can require me to waive this right.

I hereby  ❑  do not waive  ❑  my right of access to this recommendation.  ❑

Signature of applicant ____________________________________________ Date ________________________________

Failure to complete and sign this section will be considered an expressed waiver of your rights.
6. In comparison with other Ph.D. candidates that you have known, how would you rate the applicant with respect to the following qualities:

<table>
<thead>
<tr>
<th></th>
<th>Unable to comment</th>
<th>Below average/ lower 35%</th>
<th>Average/ middle 30%</th>
<th>Good/ top 35%</th>
<th>Very good/ top 20%</th>
<th>Outstanding/ top 10%</th>
<th>Truly exceptional/ top 2%</th>
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<tbody>
<tr>
<td>Intellectual ability</td>
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<td>Maturity</td>
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<td>Motivation for a scholarly career</td>
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<td>Ability to work independently</td>
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<td>Written skills</td>
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<td>Oral skills</td>
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<td>Quantitative analysis skills</td>
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<td>Creativity/imagination</td>
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7. I □ strongly recommend that this applicant be admitted to
   The Paul Merage School of Business at UC Irvine

   □ recommend

   □ recommend with some reservations

   □ do not recommend

Signature ____________________________ Date __________

INSTRUCTIONS FOR RETURNING RECOMMENDATION:

Please return this recommendation in a sealed envelope, and sign your name across the seal. Return it to the applicant as soon as possible. The applicant will submit the sealed envelope containing your recommendation as part of his/her complete application package to the UC Irvine Paul Merage School of Business Ph.D. Program Office. Your prompt response in returning this form is essential to a timely decision.

(for office use only)