LE MONE

Spirit. Inquiry. Leadership. Jesuit.





Application for Graduate Business Programs

Master of Business Administration
Information Systems

MADDEN SCHOOL OF BUSINESS

LE MOYNE COLLEGE

MADDEN SCHOOL OF BUSINESS GRADUATE PROGRAMS

INSTRUCTIONS FOR APPLICATION COMPLETION

A graduate business program candidate may take as many as two courses (six credits) as a nonmatriculated student. A third course will not be permitted until admission is awarded.

Before registering for courses, an applicant must schedule an advising appointment with the graduate program director. Course selection will be discussed and course waivers will be granted, if applicable.

APPLICATION DEADLINES

Admission decisions for the graduate busin	ess programs follow a rolling admission pol	icy with the following deadline guidelines:
July 1 – Fall matriculation	November 1 – Spring matriculation	April 1 – Summer matriculation
March 15 - The 150-hour Acco	ounting MBA deadline (available only to Le	e Moyne College accounting students)
– The 150-hour Acco	ounting MSIS deadline (available only to Lo	e Moyne College accounting students)

ADMISSION NOTIFICATION

Admission notification will be made by official letter within two weeks of application completion.

APPLICATION CHECKLIST

All application	materials must be submitted to the Office of Graduate Admission. The following are required for application completion:
	Completed Application
	An Earned Bachelor's Degree
	 Official Graduate Management Admission Test (GMAT) or Graduate Record Exam (GRE) report Please have official score report sent directly to Le Moyne College.
	Official Transcripts – Please have an official transcript from all undergraduate and graduate colleges and/or universities attended sent directly to you to include in the application packet or you may have it sent directly to the Office of Graduate Admission at Le Moyne College. (For this application, a transcript will be provided for alumni).
	Two Letters of Recommendation – Submit the attached 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 graduate program director by calling
	(315) 445-4786. Date of appointment:

INTERNATIONAL APPLICANTS

- A Test of English as a Foreign Language (TOEFL) or International English Language Testing System (IELTS) score report is required of non-native English speaking applicants in addition to the GMAT or GRE. A score of at least 79 is required on the TOEFL or at least 6.5 on the IELTS.
- International applicants must have a course-by-course transcript evaluation completed by World Education Services (wes.org). It must also show 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) for an F-1 student visa, 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 Certificate of Finance found at www.lemoyne.edu/foreign_financial.

COMPLETED APPLICATION PACKET

Please send completed application and application materials to:

Office of Graduate Admission

Le Moyne College

Grewen Hall 322 **Phone:** (315) 445-5444 1419 Salt Springs Road **Fax:** (315) 445-6092

Syracuse, NY 13214-1301 Email: 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. If you have questions, please contact Student Health Services at (315) 445-4440.

LE MOYNE COLLEGE MADDEN SCHOOL OF BUSINESS

GRADUATE PROGRAMS

APPLICATION FOR ADMISSION

Personal Data

Date	
Legal Name (Last, First, Middle)	Other Name, if Applicable
Permanent Address	
City	State ZIP Country
Phone Cell Home ()	Email
Date of Birth Month Day	Year
Do you consider yourself to be Hispanic/Latino?	☐ Yes ☐ No
In addition, select one or more of the following ra	icial categories to describe yourself:
☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American	☐ Native Hawaiian or Other Pacific Islander ☐ White
Citizenship	
☐ U.S. permanent resident visa, PRA# ☐ Other citizenship ☐ Do you need an I-20 issued by Le Moyne College	? Yes No Ograms at Le Moyne College? (Please check all that apply.)
Attendance at a specialized graduate forum/fair	(city) Alumnus/a (name)
Program brochure	☐ Placement/career counseling office at your undergraduate school
☐ Open house/campus visit	Employer
☐ College Guide listing	Friend/co-worker
☐ Television ad	☐ Relative
☐ Radio ad	☐ Le Moyne College website
☐ Printed ad (what publication)	Other
☐ Admission representative	
Program of Study	
I am applying to the following program 🏻 DMBA	☐ MSIS ☐ SUNY ESF 4+1 program ☐ Cazenovia College 4+1 program
☐ MBA/School District Business Leader (SDBL)	☐ 150-hour Accounting MBA (available only to accounting students in their junior year at Le Moyne College)
	☐ 150-hour Accounting MSIS (available only to accounting students in their junior year at Le Moyne College)

Academic Plan						
I am applying for the following se	emester 🗖 Fall 📮	Spring 🖵 Sum	mer Year			
I plan to study 🚨 Full time (ni	ne or more credits)	☐ Part time				
A CARRAGO IIVATA	D. V.					
ACADEMIC HISTO	RY					
List below the colleges from which						
request that each of these institu Admission at Le Moyne College.		nscripts to you it	or inclusion in you	иг аррисацон раскес	or directly to the	Office of Graduate
Institution	Dates	Major	Degree	Check if	Date	GPA
(State, Country)	Attended	Field	Earned	Non-degree	Awarded	(4.0 scale)
Have you ever been found responsational equivalent) forward, whremoval, dismissal or expulsion for	ether related to acade	emic misconduct		•	_	
Have you ever been convicted of	f a felony or misdeme	anor? 🗖 No 🕻	☐ Yes			
If you answered yes to either or be the circumstances.	ooth questions, please	attach a separat	e sheet that gives	the approximate dat	e of each incident	and explanation of
Other						
Are you eligible to receive Veter	an's benefits? 📮 No	☐ Yes				
Current or Mos	T RECENT I	EMPLOYM	ENT			
Current or Most Recent Employe	er			_ Job Title		
Dates of Employment				Are you e	employed 🖵 Full	time 🖵 Part time
Employer Address						
Does your employer provide tuiti	on benefits? \square No	☐ Yes				
References						
Please list the names of two profe	essional and/or acade	mic references w	ho you will ask to	complete the attach	ed Recommendati	on forms.
1. Name			R	elationship		
2. Name			R	elationship		

STATEMENT OF PURPOSE

Please write a brief essay stating, as specifically as possible, your educational and career a graduate business program at Le Moyne College. (Attach additional pages if necessary	
I certify that the information I have provided on this application is correct and comple application or giving false information will make me ineligible for admission.	ete. I understand that withholding information on this
Signature of Applicant	Date
(Your signature is necessary in order to process the application.)	

LE MOYNE COLLEGE

MADDEN SCHOOL OF BUSINESS GRADUATE PROGRAMS

RECOMMENDATION FORM

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				
Name (First, MI, Last)				Date	
Address	City		State		ZIP
Phone Cell Home ()	Email				
Program applying to: MBA MSI	S SUNY ESF 4+1 program	☐ Cazenovia C	College 4+1 progra	ım	
☐ MBA/School D	istrict Business Leader (SDBL)	150-hour Ac	ccounting MBA	☐ 150-h	our Accounting MSIS
Please Provide Name of Reference					
In accordance with the Family Educational R	ights Privacy Act of 1974, please che	ck one: 🗖 I do	☐ I do not waive 1	ny right to	read this recommendation.
Signed			Date		
To Be Completed By	Evaluator				
Name (First, MI, Last)				Date	
Organization		Job Title	2		
Address		City	St	ate	ZIP
Phone ()	Email				
How long have you known the applicant?					
How well do you know the applicant? \Box	Very Well 🔲 Well 📮 Somew	hat			
In what capacity have you known the app	licant?				
Personal and Professional Appraisa	I -				

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

		Above		Below	
Characteristics	Superior	Average	Average	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					

	al space if necessary. (Optional f	de a brief assessment of the applicant's abili- or faculty recommending Le Moyne Colleg- unting MSIS program.)		
Recommendation based on applica	ant's ability to pursue graduate st	udy:		
☐ Strongly recommend	☐ Recommend	☐ Recommend with reservations	☐ Do not recommend	
<i>O</i> ,				
To the evaluator: Please return this recommendation to the person requesting your assistance in a sealed envelope with your signature across the envelope seal.				
Signed		Date		

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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.

То Ве Сом	PLETED BY A	APPLICANT				
Name (First, MI, Last	.)				_ Date	
Address		City		State	ZIP	
Phone 🖵 cell 📮 ho	me ()	Email				
Program applying to:	☐ MBA ☐ MSIS	☐ SUNY ESF 4+1 program	☐ Cazenovia	College 4+1 program		
	☐ MBA/School Distr	rict Business Leader (SDBL)	☐ 150-hour <i>A</i>	Accounting MBA	150-hour Accounting MS	IS
Please Provide Name	of Reference					
In accordance with the	Family Educational Righ	nts Privacy Act of 1974, please che	ck one: 🗖 I do	☐ I do not waive my	right to read this recommend	ation.
Signed				Date		
	PLETED BY E	VALUATOR				
Organization			Job Tit	ele		
Address			City	State	e ZIP	
Phone ()	Email				
How long have you k	nown the applicant?					
How well do you kno	w the applicant? 🗖 Ve	ery Well 🖵 Well 🖵 Somew	hat			
In what capacity have	e you known the applic	ant?				
Personal and Profe	essional Annraisal·					

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

		Above		Below	
Characteristics	Superior	Average	Average	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					

	nal space if necessary. (Optional	ide a brief assessment of the applicant's ab for faculty recommending Le Moyne Colle unting MSIS program.)			
Recommendation based on applic	cont's shility to sure and leave	rudre.			
☐ Strongly recommend	Recommend	Recommend with reservations	□ D 1		
→ Strongly recommend	→ Recommend	■ Recommend with reservations	☐ Do not recommend		
	To the evaluator: Please return this recommendation to the person requesting your assistance in a sealed envelope with your signature across the envelope seal.				
Signed		Date			

MADDEN SCHOOL OF BUSINESS MISSION STATEMENT

The Madden School of Business strives for excellence through a 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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PH: (315) 445-5444 FAX: (315) 445-6092

GradAdmission@lemoyne.edu

MADDEN SCHOOL OF BUSINESS GRADUATE PROGRAMS

Le Moyne College Mitchell Hall 102 1419 Salt Springs Road Syracuse, NY 13214-1301

PH: (315) 445-4786 FAX: (315) 445-4787 business@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.