

## ORGANIZATION SPONSORSHIP FORM: WASHINGTON, DC

**Executive MBA Program** 

**BUSINESS TELEPHONE** 

To be completed by an authorized representative of the applicant's sponsoring organization.

NYU STERN EXECUTIVE MBA PROGRAM 44 WEST FOURTH STREET, SUITE 4–100 NEW YORK, NY 10012–1126

PHONE: (212) 998-0788 E-MAIL: <u>EXECUTIVE@STERN.NYU.EDU</u>

NAME OF APPLICA	ANT		
DR./MR./MRS./MS.	FIRST NAME	LAST NA	ME
SPONSORSHIP INI	FORMATION		
Sponsoring organization	1		
If the applicant is admir following by signing be		in Washington, DC, the sponsor	ing organization understands and agrees to the
TIME SPONSORSHIP (Re	quired)		
1. The student	will be fully released from all job re	esponsibilities on class days, inc	luding residency periods.
2. During the t	wo-year program, the student's tra	avel time will be kept to a reason	able minimum.
FINANCIAL SPONSORSH	HIP (Check <u>one</u> of the boxes below	to indicate the level of financial s	sponsorship.)
_	CIAL SPONSORSHIP: The sponsoring		
☐ 2. PARTIAL FIN	ANCIAL SPONSORSHIP: The sponso	ring organization will assume pa	rtial responsibility for program costs.
☐ 3. NO FINANCIA	AL SPONSORSHIP: The sponsoring o	organization will assume no resp	onsibility for program costs.
Please refer	to the <u>website</u> for information rela	ted to tuition and fees for studen	its entering the Washington, DC program.
	nount will be payable as follows: \$5		deposit due immediately upon
acceptance a	and the remaining balance is divide	ed into four equal payments.	
	EDDESCRITATIVE OF SPONSORING ORGANIZATIV		
	EPRESENTATIVE OF SPONSORING ORGANIZATION  e and information below:	UN	DATE
ricase cicarry print name	e and information below.		
DR./MR./MRS./MS.	FIRST NAME	LAST NAI	ME
			<del></del>
TITLE		ORGANIZATION	
COMPANY ADDRESS — NUMBE	R and STREET, FLOOR or SUITE NUMBER		
CITY / STATE		ZIP CODE	COUNTRY

**BUSINESS EMAIL**