

Course Transfer Authorization

Date: _____

This is to certify that _____ is a graduate student who is in
(student's name)

good standing at _____ in the MBA program. S/he has
(name of institution)

our approval to register for the following course(s) at the Leonard N. Stern School of Business at New York University. The credits s/he earns for course work at Stern will be counted toward the degree to be awarded from the institution, and will complete MBA requirements for this student.

Course number and title	credits
Course number and title	credits
Course number and title	credits
Course number and title	credits
Course number and title	credits

Advisor's Signature

Print Advisor's Name

Title

Name and Address of Institution

Personal Data Form

Mr. Ms.

Last name	First name	Initial
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Social Security Number	Any names used previously	Birth Date
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Present Address	Good until what date
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City	State or country	Zip code
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Permanent Address

City	State or country	Zip code
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Telephone: Home (present)	Business	Home (permanent)
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May we contact you at your business number? Yes No

E-Mail

Application is for which semester? Fall 20____ Spring 20____ Summer 20____

1. Have you previously applied for a degree or non-degree program at NYU/Stern School? Yes No
2. If yes, semester Fall Spring Summer Year _____
3. Were you admitted? Yes No Did you register? Yes No If yes, program _____

All applicants:

Native language	Country of birth
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Country of citizenship	[<input type="checkbox"/> F-1 <input type="checkbox"/> J-1 <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Other
	Visa status

Personal Data Form Continued

Undergraduate school from which degree was received

Location (city and state—if not USA, include country)

Dates of attendance: from _____ to _____
month/year month/year

Major _____ Degree Received: month/year _____

Minor _____ Date Received: month/year _____

Graduate school attending

Name of degree program with major

Location (city and state—if not USA, include country)

Dates of attendance: from _____ to _____
month/year month/year

Date degree expected: _____
month/year

Supplemental Personal Data Form

TO BE COMPLETED BY APPLICANT:

Name of Applicant Mr. Ms. _____
Last First Middle

Social Security Number (*U.S. citizens and permanent residents only*) ____ / ____ / ____

I certify that all the statements made in this application for admission to the Leonard N. Stern School of Business at New York University are correct. I agree to abide by all rules and regulations that are now, or may be in the future, in force at the University. I understand that any items submitted to New York University in conjunction with this application become the sole property of the Leonard N. Stern School of Business and will not be returned or transferred. I understand that the application fee is not refundable.

Date Signature of Applicant

Reason for needing to take credits at Stern:

Have you ever been placed on probation, suspended, or required to withdraw from any college or university?
 Yes No

If yes, please explain fully on a separate piece of paper.

Résumé

Please attach a copy of your résumé to this form.

Undergraduate Transcript Request

Information must be typed

Applicant's Name: Last, First, Middle

Social Security Number

Current Address

Name of college or university

School attended within university

From (dates of enrollment: month/year) To

Degree, major, and year

If attended under a different name from above, give other name

Date

Signature of Applicant

To the applicant: Please complete the information above and send this form and the transcript envelope provided to the registrar of the college that awarded your undergraduate degree. If you attended other undergraduate schools, photocopy this form, complete the above data and send copies to all schools attended. When you receive the completed form and transcript in the sealed envelope, include it with the materials you submit with your application. *Do not open the envelope when it is returned to you by the registrar.*

self-managed application process in which the applicant is responsible for submitting official copies of transcripts. Please attach an official copy of his or her transcript to this form and complete the remainder of the form as indicated below.

We ask that you seal the envelope and sign across the envelope seal to ensure confidentiality.

To the registrar: The above-named person is applying for admission to the Stern School of Business, New York University. The Admission Committee appreciates your cooperation in the

Return the sealed envelope to the applicant who will submit it unopened to the MBA Academic Advising office with his or her application. Thank you for your assistance.

Applicant's cumulative grade point average

Applicant's rank in class

out of

Please describe your grading system (for example, A=4, B=3, etc.) or attach such descriptive material if available

Registrar's signature

Date

Official Seal

New York University is an affirmative action/equal opportunity institution.

Graduate Transcript Request

Information must be typed

Applicant's Name: Last, First, Middle

Social Security Number

Current Address

Name of college or university

School attended within university

From (dates of enrollment: month/year) To

Degree, major, and year

If attended under a different name from above, give other name

Date

To the applicant: Please complete the information above and send this form and the transcript envelope provided to the registrar of the university that awarded your graduate degree. If you attended other graduate schools, photocopy this form, complete the above data and send copies to all schools attended. When you receive the completed form and transcript in the sealed envelope, include it with the materials you submit with your application. *Do not open the envelope when it is returned to you by the registrar.*

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Signature of Applicant

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Registrar's signature

Date

Official Seal

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