

**INTERNATIONAL APPLICATION FOR**

# Master of Business Administration

For information on Undergraduate, Credential, or Colloquy, please contact the Admission Office for appropriate application.



## UNIVERSITY MISSION STATEMENT

Concordia University Irvine, guided by the Great Commission of Christ Jesus and the Lutheran Confessions, empowers students through the liberal arts and professional studies for lives of learning, service and leadership.

1530 Concordia West, Irvine, CA 92612-3203  
Attn: MBA Admissions  
Phone: (949) 214-3032 • (800) 229-1200, ext. 3032  
Fax: (949) 214-3032  
E-mail: [gradadmissions@cui.edu](mailto:gradadmissions@cui.edu)

**[WWW.CUI.EDU](http://WWW.CUI.EDU)**

Please send application form and requested items to:

**Attn: MBA Admissions**  
**Concordia University**  
**1530 Concordia West**  
**Irvine, CA 92612-3203**  
or  
**gradadmissions@cui.edu**

To **complete your admission file** we will need:

1. Completed Application
2. Application fee of \$150 (USD)
3. Official Transcripts and Evaluations
4. Completed Statement of Intent (Form available online at cui.edu/mba)
5. Two completed Reference Forms (Forms available online at cui.edu/mba)
6. Current resume or vita
7. Proof of English Proficiency TOEFL (PBT 570 / IBT 88) / IELTS (7.0) - Score from within the past two years

Please **PRINT** or type

Applicant's name \_\_\_\_\_  
Family Name First Name Middle Names Given Name

Semester you plan to enroll at Concordia: Fall 1: 20\_\_\_\_ Spring 1: 20\_\_\_\_ Summer 1: 20\_\_\_\_  
Fall 2: 20\_\_\_\_ Spring 2: 20\_\_\_\_ Summer 2: 20\_\_\_\_

**US ADDRESS** (if available)

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**NATIVE COUNTRY ADDRESS** (1-20 will be mailed to this address)

Street \_\_\_\_\_

City \_\_\_\_\_ Permant/Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Facebook Email: \_\_\_\_\_ Twitter Username: \_\_\_\_\_

Cell phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

E-mail address: \_\_\_\_\_

List only **active address** that you check frequently. This **e-mail address will be used for electronic communication** between the university and you.

**PERSONAL BACKGROUND**

Date of birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Month Day Year City State Country

Gender: ☐ Male ☐ Female Country of Citizenship: \_\_\_\_\_

Native Language: \_\_\_\_\_

Have you been found guilty, been adjudicated guilty, or otherwise been convicted of a crime in any court? (excluding minor traffic violations)

☐ Yes ☐ No If you answered yes to either question above, please attach a full description including date(s) and disposition of case.

Where do you currently work? \_\_\_\_\_

Are you considering applying / have you applied to other MBA programs? ☐ Yes ☐ No If yes, which ones? \_\_\_\_\_

**PREVIOUS EDUCATION**

1. College/University Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Dates attended \_\_\_\_\_ Units completed at the time of application \_\_\_\_\_

Degree and Date Received \_\_\_\_\_ Cumulative GPA (based on a 4.0 scale) \_\_\_\_\_

2. College/University Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Dates attended \_\_\_\_\_ Units completed at the time of application \_\_\_\_\_

Degree and Date Received \_\_\_\_\_ Cumulative GPA (based on a 4.0 scale) \_\_\_\_\_

(List additional schools attended on a separate sheet.)

**RELIGIOUS AFFILIATION**

- ☐ Lutheran Church – Missouri Synod    ☐ Baptist    ☐ Evangelical Lutheran Church of America    ☐ Catholic  
☐ Non-Denominational Christian    ☐ Methodist    ☐ Presbyterian    ☐ None    ☐ Other

Congregation name \_\_\_\_\_ Pastor's name \_\_\_\_\_

Congregation address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (       ) \_\_\_\_\_

**RACE/ETHNICITY**

Do you consider yourself to be Hispanic/Latino?    ☐ Yes    ☐ No

In addition, please select one or more of the following racial categories to describe yourself:

- |  |                                     |                                       |  |
|--|-------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> American Indian or Alaskan Native   | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Mexican      | <input type="checkbox"/> Filipino                  |
| <input type="checkbox"/> White or Caucasian                  | <input type="checkbox"/> Japanese   | <input type="checkbox"/> Cuban        | <input type="checkbox"/> Other Asian               |
| <input type="checkbox"/> Black or African American           | <input type="checkbox"/> Korean     | <input type="checkbox"/> Puerto Rican | <input type="checkbox"/> Other Hispanic or Latino  |
| <input type="checkbox"/> Native Hawaiian or Pacific Islander | <input type="checkbox"/> Chinese    | <input type="checkbox"/> Asian Indian | <input type="checkbox"/> South or Central American |

**VISA INFORMATION**

Are you currently in the U.S.?    ☐ No    ☐ Yes; Visa Status:    ☐ F1    ☐ H1    ☐ L1    ☐ Other \_\_\_\_\_

Visa Issue Date \_\_\_\_\_ Visa Expiration Date \_\_\_\_\_  
(mm/dd/yyyy) (mm/dd/yyyy)

Passport Expiration Date \_\_\_\_\_ SEVIS Tracking Number N \_\_\_\_\_  
(mm/dd/yyyy)

Are you transferring from a school in the U.S.A.?    ☐ No    ☐ Yes; Please complete section below.

If you are a transfer student, will you be leaving the U.S.A. before starting your program?    ☐ No    ☐ Yes; Departure date: \_\_\_\_\_  
(mm/dd/yyyy)

If transferring from another school in the U.S.A., you are required to provide a copy of the following documents:

- |  |   |                       |
|--|---|-----------------------|
| 1. All the I-20's from the schools you have attended | 3. The front and back of your I-94 form | 5. Your transfer form |
| 2. Your passport photo page                          | 4. Your visa.                           |                       |

**TESTING INFORMATION**

GMAT Test Date: \_\_\_\_\_ TOEFL Test Date: \_\_\_\_\_ IELTS Test Date: \_\_\_\_\_

GMAT Test Score: \_\_\_\_\_ TOEFL Test Score: \_\_\_\_\_ IELTS Test Score: \_\_\_\_\_

**DEPENDENTS' INFORMATION** (for F-2 Visa)

Do you intend to bring your spouse or children with you?    ☐ No    ☐ Yes; Please complete the section below and submit a photocopy of each passport.

**Dependent #1**

Family name: \_\_\_\_\_ First Name: \_\_\_\_\_

Middle Name(s): \_\_\_\_\_

☐ Male    ☐ Female    Date of Birth (month/day/year): \_\_\_\_\_ Country of Birth \_\_\_\_\_

Relationship to you: \_\_\_\_\_

**Dependent #2**

Family name: \_\_\_\_\_ First Name: \_\_\_\_\_

Middle Name(s): \_\_\_\_\_

☐ Male    ☐ Female    Date of Birth (month/day/year): \_\_\_\_\_ Country of Birth \_\_\_\_\_

Relationship to you: \_\_\_\_\_

*(List additional dependents on a separate sheet.)*

How Did You Hear About Concordia University Irvine?

Why Did You Choose Concordia University Irvine?

#### **NONDISCRIMINATION POLICY**

Concordia University does not discriminate on the basis of race, color, national and ethnic origin, sex, or disability in any of its policies, procedures or practices. This includes but is not limited to admissions, employment, financial aid, educational services, programs and activities. Inquiries regarding this policy may be directed to the Vice President of Administration at Concordia University, 1530 Concordia West, Irvine, CA 92612-3203

#### **CERTIFICATION**

I certify that to the best of my knowledge the information furnished in this application is true and complete. I agree that if such information, or any information upon which my admission is based, is not true or complete, Concordia University may rescind my degree. I further agree that if admitted, I will abide by the rules and regulations of Concordia University including, but not limited to, those rules contained in the current Concordia University catalog. I acknowledge that all official transcripts which I forward to Concordia University become the property of Concordia University and will not be forwarded to any institution nor returned to me.

I also understand that I am not eligible for financial aid unless I am accepted into a post-baccalaureate or graduate program. I am not eligible to receive financial aid for any courses taken prior to admission to the graduate program.

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*Applicant's signature*

*Date*

