

## Application

### PROGRAM:

- |  |   |                                   |                                      |
|--|---|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> MBA (Nyack-Rockland campus) | <input type="checkbox"/> MSOL (Nyack-Rockland campus) |                                   |                                      |
| <input type="checkbox"/> MBA (NYC campus)            | <input type="checkbox"/> MSOL (NYC campus)            |                                   |                                      |
| <input type="checkbox"/> Organizational Management   |   |                                   |                                      |
| <input type="checkbox"/> Nyack                       | <input type="checkbox"/> Queens                       | <input type="checkbox"/> Brooklyn | <input type="checkbox"/> Online      |
| <input type="checkbox"/> Manhattan                   | <input type="checkbox"/> Orange County                | <input type="checkbox"/> Albany   | <input type="checkbox"/> Other _____ |

### PERSONAL INFORMATION:

LAST NAME *please print clearly* FIRST NAME MIDDLE INITIAL MAIDEN/PREVIOUS

ADDRESS CITY, STATE, ZIP, COUNTRY

HOME PHONE WORK PHONE

EMAIL CELL PHONE

BIRTHDATE MM/DD/YY SOCIAL SECURITY NUMBER

Gender:  Male  Female      Citizenship:  US Citizen  
 US Permanent Resident (Country of Citizenship? \_\_\_\_\_)  
 Non-Resident of US (Country of Citizenship? \_\_\_\_\_)  
 Visa type? \_\_\_\_\_

Race (optional):

- Hispanic/Latino  
*If not Hispanic/Latino, choose one or more of the following:*
- |   |                                |  |
|---|--------------------------------|--|
| <input type="checkbox"/> Black or African American        | <input type="checkbox"/> Asian | <input type="checkbox"/> Native Hawaiian or Pacific Islander |
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> White | <input type="checkbox"/> Multi-Racial                        |

Marital Status (optional):

- Single       Married       Widowed       Divorced       Separated

Denomination (optional): \_\_\_\_\_

How did you first hear about Nyack College? \_\_\_\_\_

### ACADEMIC HISTORY List all colleges and universities attended:

Name \_\_\_\_\_ Dates Attended \_\_\_\_\_ Degree Received \_\_\_\_\_

Name \_\_\_\_\_ Dates Attended \_\_\_\_\_ Degree Received \_\_\_\_\_

Name \_\_\_\_\_ Dates Attended \_\_\_\_\_ Degree Received \_\_\_\_\_

When can you begin the program? \_\_\_\_\_

I certify that the above information is complete and true.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail completed application in the enclosed envelope with the appropriate application fee (\$30 Organizational Management, \$50 MBA/MSOL).

Nyack College is an educational institution that admits academically qualified students without regard to sex, age, race, color, religion, natural origin and ancestry, marital status, parenthood, or handicap, to all the rights, privileges, programs and opportunities generally available to students.