



Application for Graduate Admission

MS in Accounting Application Fee: \$100
All Other Programs Application Fee: \$90

ADMISSIONS INFORMATION

Please mark the box to indicate to which graduate program you are applying. Some programs may also ask you to select the area in which you will concentrate your studies. Admission to New England College's graduate programs is selective, however, the College takes into consideration all aspects of the applicant's background and abilities, including professional experience, writing skills and other accomplishments that are relevant to a particular program of study. Standardized test scores are not required. Admission to the graduate program functions on a rolling basis, which means that decisions are generally rendered within two weeks of an applicant's file being completed. Application requirements vary for each master's degree program, so it is important to check with your admissions advisor to verify the materials needed to complete a particular file.

ALL PROGRAMS REQUIRE THE SUBMISSION OF:

1. Completed and signed application form.
2. Application fee of \$100 (MSA program) or \$90 (all other programs) in check or money order payable to New England College (in U.S. dollars).
3. Official transcripts of all post-secondary institutions attended.
4. Two letters of recommendation that attest to your professional ability as well as your qualifications for graduate study.
5. Current resume.
6. Personal statement describing your professional goals, background, and the experiences that have led to your decision to pursue a graduate degree.

PERSONAL DATA

Title: Mr. Ms. Mrs. Dr. Rev. Other _____

Last Name: First Name:

Middle Name: Former Name:

Social Security Number:

Are you a U.S. citizen? Yes No

If no, are you a legal permanent resident in the United States? Yes No

If yes, alien registration number:

If no, Country of Birth: Country of Citizenship:

Current Type of Visa: Date of Birth (optional):

CURRENT MAILING ADDRESS

Number and Street:

City: State: Zip Code :

Country:

Email:

Telephone (include area code): Fax (include area code):

PERMANENT MAILING ADDRESS

Number and Street:

City: State: Zip Code :

Country:

Telephone (include area code): Fax (include area code):

EMPLOYMENT

Current Employer:

Number and Street:

City: State: Zip Code :

Country:

Telephone (include area code):

Current Title:

TERM OF INTENDED ENROLLMENT

Semesters: Fall 1 20 ____ Spring 1 20 ____ Summer 1 20 ____
 Fall 2 20 ____ Spring 2 20 ____ Summer 2 20 ____

Program: (check one program)

- | | |
|--|---|
| <input type="checkbox"/> Master of Science in Management (check one concentration) | <input type="checkbox"/> Master of Arts in Public Policy |
| <input type="checkbox"/> Banking and Financial Management | <input type="checkbox"/> Master of Science in Criminal Justice Leadership |
| <input type="checkbox"/> Healthcare Administration | <input type="checkbox"/> Master of Science in Accounting |
| <input type="checkbox"/> Marketing Management | |
| <input type="checkbox"/> Nonprofit Leadership | |
| <input type="checkbox"/> Operations Management | |
| <input type="checkbox"/> Project Management | |
| <input type="checkbox"/> Real Estate Management | |
| <input type="checkbox"/> Strategic Management | |

PREVIOUS SCHOOLS ATTENDED

Institution	Major Field of Study	Dates Attended	Degree Earned

Relevant workshops, educational/training conferences, and seminars recently attended:

List any current occupational license, certificate, or registration:

List any publications, awards, academic and professional prizes, or grants:

List any extracurricular interests, hobbies, or other activities or achievements that would be relevant to your program of study:

Have you ever been subject to academic suspension or dismissal? Yes No

If yes, please list the dates and circumstances:

Do you intend to apply for financial aid? Yes No

REFERENCES

Please list the information of those who will be writing letters of recommendation for you.

Name	Title	Occupation	Address	Telephone Number

List any members of your immediate family who have attended or who are affiliated with New England College:

Race/ethnicity (optional): _____

To which other graduate programs are you applying?

How did you first learn of New England College's graduate program?

I have answered all required questions on the application accurately and to the best of my ability. I understand that it is my responsibility to see that all requirements for admission are completed. I agree, if admitted, to adhere to all rules and regulations prescribed by New England College as they apply to enrolled students.

Applicant's Signature

Date

STATEMENT OF NON-DISCRIMINATION

New England College, in accordance with federal and state laws and regulations, does not discriminate on the basis of race, color, creed, religion, national origin, sexual orientation, sex, age, veteran's status, or disability, in regard to treatment, access to, or employment in its program and activities. In compliance with the Americans with Disabilities Act (ADA), individuals needing accommodation should contact the ADA Compliance Officer.