



University of Pittsburgh
The Joseph M. Katz Graduate School of Business
Pittsburgh, PA 15260

Doctoral Program Application
 Updated 11/5/2009

Submit application in an envelope. Please print in ink or type entries. Add additional sheets if necessary.

NAME Last		First				Middle	
PRESENT ADDRESS UNTIL WHEN?		No. & Street	City	State	Zip Code	PHONE Area Code & Number	
PERMANENT (OR BUSINESS) ADDRESS		No. & Street	City	State	Zip Code	PHONE Area Code & Number	
PRESENT OCCUPATION (student, manager, teacher, etc.)						FACSIMILE NUMBER	
CITIZENSHIP			NATURE AND STATUS OF VISA			E-MAIL ADDRESS	
Are you a Pennsylvania Resident?							

DEMOGRAPHIC DATA (Optional)

The University of Pittsburgh, as an educational institution and as an employer, values equalities of opportunity, human dignity, and racial/ethnic and cultural diversity. Accordingly, the University prohibits and will not engage in discrimination or harassment on the basis of race, color, religion, national origin, ancestry, sex, age, marital status, familial status, sexual orientation, or a veteran of the Vietnam era. This demographic information is requested on a voluntary basis, will be kept confidential, and is intended to assist the University in providing data to demonstrate compliance with civil rights laws. Participation is optional. Refusal to complete this information will not be used to deny access or admission or otherwise affect consideration of your application.

Are you of Hispanic or Latino Ethnicity (meaning a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)? Yes _____ No _____

Please select one or more race(s)/Ethnicity(ies) from the following groups that you identify with:

Native American Indian/Alaskan _____ Asian _____ Black/African American _____

Native Hawaiian/Pacific Islander _____ White _____ Other _____

If Other then please elaborate _____

Gender _____ Birth Date _____

PROGRAM AND START DATE

PLANNED MAJOR _____ FULL-TIME _____

and

PLANNED MINOR _____

or

AREAS OF INTEREST, IF UNDECIDED _____

PLANNED ENROLLMENT DATE: September _____ (Year) Other _____ (Year)

Have you previously applied to the Katz GSB, Doctoral Program? Yes _____ No _____ If yes, when? _____

OTHER SCHOOLS TO WHICH YOU HAVE APPLIED OR PLAN TO APPLY

FINANCIAL AID AVAILABLE TO FULL-TIME STUDENTS ENROLLING IN SEPTEMBER ONLY

Do you wish to be considered for a graduate research assistantship? Yes _____ No _____

If the indicated financial award is not available, do you still wish to have your application considered?
Yes _____ No _____

EMPLOYMENT RECORD

List major employment since high school (omitting casual jobs) including military service. Use additional sheets if necessary. Please include your resume.

Total number of years of full-time work experience and/or military duty. _____ years _____ months

Total number of years of managerial experience. _____ years _____ months

NAME AND LOCATION OF EMPLOYER	NATURE OF POSITION	DATES, FROM - TO	

ACADEMIC RECORD

List in chronological order all academic work done beyond high school, regardless of whether a degree or credit was earned. Use additional sheets if necessary.

COLLEGE OR UNIVERSITY	LOCATION	MO./YR. OF ENTRANCE AND TERMINATION	FIELD OF CONCENTRATION	DEGREE & DATE

TEST INFORMATION

Date on which the Graduate Management Admissions Test or Graduate Record Exam was or will be taken. (Test scores earned within the past 10 years will be accepted. Students whose scores precede that period are required to retake the exam). _____

If a foreign applicant, date on which the Test of English as a Foreign Language was or will be taken. _____

Indicate your GMAT scores, if known.	Verbal	Quantitative	Analytical Writing	Total
Indicate your GRE scores, if known.	Verbal	Quantitative	Analytical	
Indicate your TOEFL scores, if known.	Listening Comp.	English Structure	Vocabulary	
	Reading Comp.	Writing Ability		Total

RECOMMENDATIONS

Give names, positions, and addresses of the three people that you have asked to write letters of recommendation

OTHER IMPORTANT PROFESSIONAL OR LIFE EXPERIENCE(S) RELEVANT FOR DOCTORAL STUDY.

NAME OF ACTIVITY	DATES, FROM - TO	

PUBLICATIONS

ACADEMIC HONORS, AWARDS, SCHOLARSHIPS, FELLOWSHIPS, ETC.

Using additional sheets, please answer the following questions separately and attach your responses.

1. Do you believe that your GMAT or GRE scores and academic record adequately reflect your ability and potential for PhD study?
2. What are your career objectives, and how do you believe that a PhD program will contribute to their achievements?
3. How do your present and past academic, employment, and other professional and life activities fit into these objectives?
4. Briefly indicate how you became aware of your PhD program and why you decided to apply.

Please provide any additional information you believe may be useful to the doctoral committee in evaluating your application. Use additional sheets if necessary.

Applicant's Signature _____

Date _____



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Doctoral Program
Recommendation Evaluation

NOTE TO APPLICANT:

Enter your name and address below. Give or send a copy of this form and the enclosed envelope to three persons (preferably faculty members) who are able to comment on your qualifications for doctoral study.

APPLICANT'S NAME _____ PLANNED MAJOR _____

ADDRESS _____

Please check the appropriate box below indicating whether you have/have not waived your right of access to this recommendation evaluation under the Buckley Amendment.

- I HEREBY WAIVE MY RIGHT OF ACCESS TO THIS RECOMMENDATION EVALUATION
- I DO NOT WAIVE MY RIGHT OF ACCESS TO THIS RECOMMENDATION EVALUATION

Applicants Signature _____

NOTE TO EVALUATOR:

In the space provided below, please assess the applicant's qualifications and potential for doctoral study. Please feel free to include anything which bears upon the individual's future academic or professional career. (Attach additional sheets if necessary.)

In accordance with the self-managed application procedure, please complete this form, place in the envelope provided by the applicant, sign your name across the envelope flap to ensure confidentiality and return the envelope *directly to the applicant*. He or she will then submit this recommendation to the Admissions Office as part of the complete application package.

<i>(Please print or type).</i>	
Name	Signature
Position/Title	Organization
Address	Date



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Doctoral Program
Instructions for Applicants

In order to be considered for admission to the doctoral program, an applicant must submit, or cause to be submitted all of the following items:

- (1) Application Form.
- (2) Application fee of \$50. This fee is **required** of all applicants, is not refundable, and will not be waived or deferred. Application submitted without the fee will be returned. Please make check or money order payable to the University of Pittsburgh. **(Do not send cash).**
- (3) Official transcripts, bearing an original school seal, of all college and university work (including work which did not lead to a degree, or credits which were transferred).
- (4) Report of the results of the Graduate Management Admission Test (GMAT) or Graduate Record Examination (GRE). When requesting that scores be sent to the Katz Graduate School of Business Doctoral Program, the school code you must provide Pearson Inc are DPZ-M5-90 for the GMAT test and 2998 (choose appropriate sub-code major) for the GRE test.
- (5) Three letters of recommendation from persons who have known the applicant in academic or professional capacities. (All applicants are required to complete the top portion of the evaluation from prior to forwarding it to an evaluator).
- (6) International applicants must also submit a special set of forms (Financial Statement, Additional Questions, Report of Proficiency in English, and Affidavit of Support) and the following additional credentials: (a) official academic records accompanied by notarized English translations, including diplomas for degrees earned; (b) test scores in the Test of English as a Foreign Language – TOEFL (required of applicants whose official native language is not English even if English was the medium of instruction in the foreign schools attended by the applicant). When requesting that TOEFL scores be sent to the Katz Graduate School of Business Doctoral Program, the school code you must provide to ETS is 2998-02.

All submissions and other correspondence should be addressed to:

Director, Doctoral Program
The Joseph M. Katz Graduate School of Business
282 Mervis Hall
University of Pittsburgh
Pittsburgh, PA 15260

All applicants are responsible for checking by letter or phone with the Office of the Doctoral Director to ensure that all application materials have been received. (Experience has shown that this is particularly necessary in the cases of transcripts and letters of recommendation). It is wise to do so several weeks before the completed application is due. Photocopies or materials transmitted through facsimile are not considered official documents, and will be not accepted as application credentials.