Application Form
International MBA Program
Guilford Glazer Faculty of Business and Management GGFBM
Ben-Gurion University of the Negev

APPLICANT PERSONAL INFORMATION

Last Name: ____________________________________________
First Name(s): ____________________________________________
*IN HEBREW: Last Name: ____________ First Name:__________

Date of Birth:____________________ Male/Female: __________
Passport Number or I.D. Number (for Israeli applicants): __________

Citizenship (list every country of citizenship): _______________________
__________________________________________________________

Status in Israel: _______________________

Marital Status: ________________ Number of Children: ______

Legal Permanent Address: ____________________________________________

Preferred Mailing Address: ____________________________________________

Mobile Phone Number: ____________________________________________
Preferred Phone Number: ____________________________________________

E-Mail Address: ____________________________________________

How did you hear about our program?

______________________________

Tel: +972-(0)8-647-2783 ● Email: IMBA@som.bgu.ac.il
http://in.bgu.ac.il/en/fom/IMBA/Pages/default.aspx
ACADEMIC INFORMATION

Undergraduate Degree:

Academic Institution: ________________________________
State/Country: ________________________________
Department: ________________________________
Major: ________________________________
Additional Field of Study (second major, minor, etc.): ________________________________
Dates of Study: ___________ to ___________
    • If incomplete. I expect to receive the degree on: ___/___/____
Degree Awarded (e.g. B.A., B.Sc.): ________________________________
GPA: ________________________________
Class Ranking/Standing (if available): ________________________________

Additional Institutions / Degrees:

Academic Institution: ________________________________
State/Country: ________________________________
Department: ________________________________
Major: ________________________________
Additional Field of Study (second major, minor, etc.): ________________________________
Dates of Study: ___________ to ___________
    • If incomplete. I expect to receive the degree on: ___/___/____
Degree Awarded (e.g. B.A., B.Sc.): ________________________________
GPA: ________________________________

Test Scores:

GMAT (or GRE)
    Date Taken (or intend to take): ________________________________
    Quantitative Score: ________________________________
    Verbal Score: ________________________________

TOEFL
    If English is not your first language, please provide your TOEFL score.

__________________________________________
PROFESSIONAL EXPERIENCE

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SUPPORTING DOCUMENTS

Please include copies of the following supporting documents:

1. Curriculum Vitae (CV)
2. Diploma(s)**
3. Transcript(s)**
4. GMAT (or GRE)**
5. If available, official Class Ranking in your departments graduating class**
6. TOEFL examination score** (if applicable)
7. For non-Israeli students:
   a. Copy of the first page of each Passport
   b. Copy of Birth Certificate. If the certificate is not in English, include an English translation. (No need for an official or notarized translation.)

** Document originals must be presented by the first day of classes.

Signature: ___________________________ Date: ___________________________