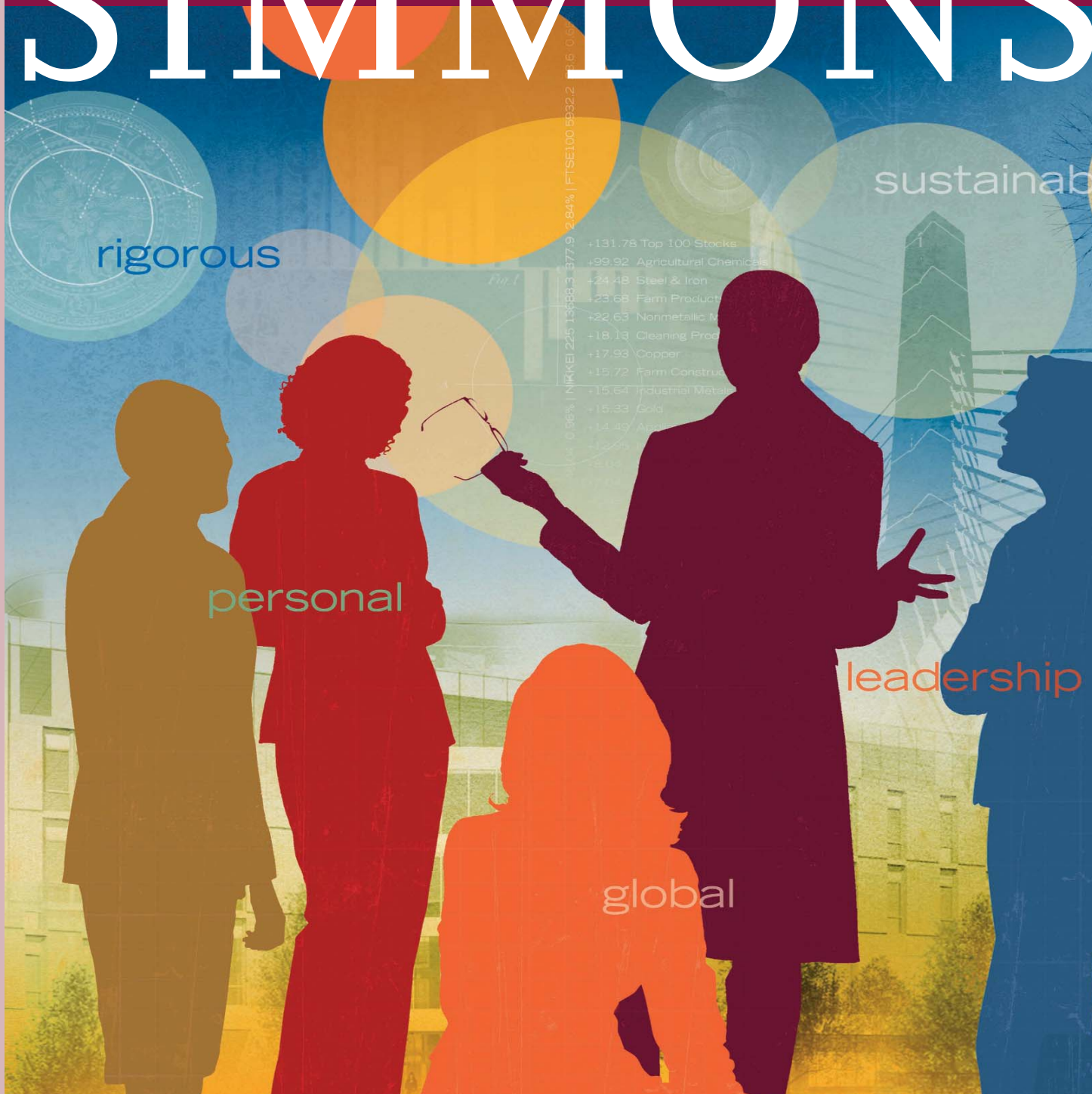


APPLICATION FOR ADMISSION

School of Management

# SIMMONS

SIMMONS COLLEGE BOSTON, MASSACHUSETTS





## APPLICATION INSTRUCTIONS

Thank you for your interest in the Simmons MBA Program, the leading MBA program in the United States designed specifically to educate women leaders. All of the information and materials necessary to apply are contained in this packet and are available online at [www.simmons.edu/som/mba/admission](http://www.simmons.edu/som/mba/admission). Candidates are encouraged to submit application components as they are completed. In turn, our Office of Admission will notify you upon receipt of such components and will provide you with a reminder of what may be missing.

We look forward to receiving your application and to the opportunity to work with you!

### ADMISSIONS CRITERIA

The Simmons MBA Admissions Committee seeks applicants who demonstrate solid accomplishments in educational and professional settings, and who possess leadership potential. The committee attempts to measure potential, both for academic success in the program and for professional success thereafter. The committee does not follow a formula in making its decisions; rather, it strives to evaluate a candidate's ability, aptitude, and promise.

### ADMISSION REQUIREMENTS

All candidates are required to submit the following:

- A completed application form, including 3 essays
- A non-refundable application fee of \$75 (payable to Simmons College)
- Two letters of recommendation
- An official transcript(s) of all undergraduate and graduate-level courses taken\*
- An official GMAT score report (the code for Simmons is 6PD-2C)
- A current résumé

\*International transcripts must be officially translated and evaluated for educational equivalency.

We encourage you to keep photocopies of your application and supporting documents, other than those that are submitted in sealed envelopes.

### INTERNATIONAL STUDENTS

In addition to the previously listed requirements, international students must submit the following:

- An official TOEFL or IELTS score (Simmons code 3761)
- An International Declaration and Certification of Finances (DCF) form, along with original bank statements, to demonstrate ability to pay tuition and living expenses while enrolled at Simmons. The DCF form may be found online at: [www.simmons.edu/som/mba/forms](http://www.simmons.edu/som/mba/forms). Upon acceptance, a candidate will need to submit copies of her visa, passport, and the receipt of her SEVIS I-901 fee payment in order for Simmons to generate an I-20 form.

### TIMEFRAMES

The School of Management has a rolling admissions policy and reviews applications as they are submitted throughout the year. For fall enrollment, the suggested timeframe for submitting applications is by July 31<sup>st</sup>. For spring enrollment, it's by November 3<sup>rd</sup>. The Office of MBA Admission encourages candidates to submit components of their application as they are completed. **The School of Management considers applicants for merit scholarships with priority given to those who apply by the suggested deadlines mentioned above. We have a rolling admissions policy once the deadline has past.**

## APPLICATION INSTRUCTIONS (CONTINUED)

We encourage you to explore the School of Management's web site in detail at **management.simmons.edu** to learn the most up-to-date information about the MBA curriculum, faculty publications, events, and research initiatives. Additional information regarding course listings, tuition and fees, and the academic calendar is also available on our web site.

### SCHEDULING, PREPARING FOR, AND TAKING THE GMAT

Applicants are required to take the Graduate Management Admission Test (GMAT). The GMAT is available year-round at test centers throughout the world. For information, go to **www.mba.com** or call 1-800-GMAT-NOW.

### IMPORTANT RESOURCES

#### OFFICE OF ADMISSION

409 Commonwealth Avenue  
Boston, MA 02215  
Tel: 617-521-3840  
Fax: 617-521-3880  
Email: somadm@simmons.edu  
**www.simmons.edu/som**

#### STUDENT FINANCIAL SERVICES

Simmons College  
300 The Fenway  
Boston, MA 02115  
Tel: 617-521-2001  
Email: Financialaid@simmons.edu

U.S. citizens and permanent residents applying for need-based financial assistance in the form of federal loans must submit the Free Application for Federal Student Aid (FAFSA) and the Simmons Application for Graduate Aid. These forms may be found at: **www.simmons.edu/sfs**.

#### TOEFL

Educational Testing Service  
Tel: 609-771-7100  
**www.toefl.org**

#### TRANSCRIPT TRANSLATION SERVICE

Center for Educational Documentation  
PO Box 231126  
Boston, MA 02123  
Tel: 617-338-7171  
**www.cedevaluations.com**

# APPLICATION FOR ADMISSION

SUBMIT TO: OFFICE OF ADMISSION SIMMONS SCHOOL OF MANAGEMENT 409 COMMONWEALTH AVENUE BOSTON, MA 02215  
TEL: 617-521-3840 FAX: 617-521-3880 EMAIL: SOMADM@SIMMONS.EDU WEB SITE: WWW.SIMMONS.EDU/SOM

## APPLICATION FOR

Entry in fall \_\_\_\_\_:

- Full-time, 1 year program
- Full-time, 16-month program
- Part-time, 2-year evening program
- Part-time, 3-year evening program
- Coordinated MBA/MSW program

Entry in spring \_\_\_\_\_:

- Part-time to Full-time program
- Part-time, 2 1/2-year evening program
- Part-time, 3 1/2-year evening program

- Yes, I am interested in exploring the MBA Certificate in Entrepreneurship.
- Yes, I am interested in the Certificate in Healthcare Administration.

## PERSONAL INFORMATION

Name \_\_\_\_\_  
last or family name first middle initial maiden name

Birth date \_\_\_\_\_ Social Security number \_\_\_\_\_  
month day year

Present address \_\_\_\_\_  
street apartment

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Email address \_\_\_\_\_

Permanent address \_\_\_\_\_  
street apartment

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

Company and title \_\_\_\_\_

Business address \_\_\_\_\_  
street

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_

Total years of full-time work experience \_\_\_\_\_ **Please attach a copy of your résumé.**

Citizen of \_\_\_\_\_ Country of birth \_\_\_\_\_

If you are not a United States citizen, do you have permanent resident status?  Yes  No

If not, and you live in the United States, please indicate visa status \_\_\_\_\_

Is English your first language?  Yes  No Languages other than English in which you are fluent \_\_\_\_\_

The Simmons School of Management seeks information about its applicant pool solely to evaluate its ongoing efforts to attract a diverse student body. Your response to this question will not affect your candidacy for admission to Simmons College.

Please indicate:

- Asian American  Black/African American  Native American
- Hispanic/Latina  Caucasian/White  Other (please specify) \_\_\_\_\_

## EDUCATIONAL INFORMATION

List every school attended since you completed high school (most recent first).

School and location	Areas of study	Degree	Dates attended

Please list and submit official transcripts for all undergraduate and graduate-level courses.

Undergraduate GPA \_\_\_\_\_ Graduate GPA \_\_\_\_\_

## ACADEMIC HONORS

Briefly describe any scholastic distinctions or honors you have earned. \_\_\_\_\_

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## COMMUNITY INVOLVEMENT AND HONORS

Briefly describe community, volunteer, and other extracurricular organizations you are a member of including offices held.

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## SPECIFIC PREPARATION

Please use the following table to summarize your academic experience in courses that establish a particularly relevant foundation for the Simmons MBA. *Note that this supplemental information may be used as a guide by our admission staff for transfer credits.*

	Course title and school	Year	Grade on transcript
Economics			
Accounting/Finance			
Mathematics/Statistics			
Other business-related courses			
Other standardized tests (optional)			

**RECOMMENDATIONS**

Please list two people whom you have asked to submit recommendations. At least one letter of recommendation should come from your present or previous employer, someone familiar with your recent professional accomplishments and leadership potential. We prefer not to receive recommendations from former professors.

Name \_\_\_\_\_ Title \_\_\_\_\_

Company/Organization \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Company/Organization \_\_\_\_\_

Address \_\_\_\_\_

**ESSAYS**

Answer the following questions on separate sheets. Limit yourself to one page each single spaced, and type your name on each attachment.

- 1. What are your short and long term career goals and aspirations? How will an MBA help you at this point in your career?
- 2. Describe an experience where you made a considerable contribution at your workplace or in your community. What attributes and strategies did you use to be successful?
- 3. What characteristics, experiences, or skills do you have as an individual that will add value to our classroom? What are you hoping to take away from the other students and professors unique to the **Simmons** MBA program?

**OTHER INFORMATION**

How did you learn and become interested in the Simmons School of Management's MBA program?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you have been referred by one of our alumnae or a current student, please tell us her name.

\_\_\_\_\_  
\_\_\_\_\_

*Optional:* Please indicate other graduate schools of management or business administration programs to which you are applying.

\_\_\_\_\_  
\_\_\_\_\_

**ATTESTATION OF TRUTHFULNESS**

Please read the following attestation of truthfulness. By signing below, you formally submit your application to Simmons College, and agree to and accept the terms and conditions in the statement below.

I hereby state that the information contained in this application is complete, factually accurate, and honestly presented as of the date below. I further assert that this material is for the sole use of Simmons College in determining my suitability for admission. Application materials become the property of Simmons College; they are accessible to me upon my matriculation in accordance with federal law. I understand that upon acceptance and matriculation, I am subject to the academic rules and regulations of Simmons College and to the ethical standards and conduct as a student as interpreted by the College.

\_\_\_\_\_  
applicant's signature

\_\_\_\_\_  
date

**FINANCIAL AID CHECKLIST**

The following checklist has been included to assist you in ensuring that your graduate management education is affordable. Answers to these questions have no bearing on the evaluation of your application.

My employer offers tuition reimbursement % \_\_\_\_\_ or amount per year \_\_\_\_\_

I will need an Employer Reimbursement Participation Application (ERPA).  Yes  No

Would you like to be considered for scholarships?  Yes  No

**U.S. citizens only**

I have completed the Free Application for Federal Student Aid (FAFSA) (Simmons code #002208).  Yes  No

Date \_\_\_\_\_

I have completed the Simmons Application for Graduate Financial Aid.  Yes  No

Date \_\_\_\_\_

**International students only**

I have completed the Declaration and Certification of Finance form.  Yes  No

# RECOMMENDATION FORM

**SUBMIT TO:** OFFICE OF ADMISSION SIMMONS SCHOOL OF MANAGEMENT 409 COMMONWEALTH AVENUE BOSTON, MA 02215  
TEL: 617-521-3840 FAX: 617-521-3880 EMAIL: SOMADM@SIMMONS.EDU WEB SITE: WWW.SIMMONS.EDU/SOM

Recommender \_\_\_\_\_

Title \_\_\_\_\_

Company/Organization \_\_\_\_\_

Address of organization \_\_\_\_\_  
street

city state zip

Telephone ( ) \_\_\_\_\_

## TO THE APPLICANT

Request recommendations from two people who can evaluate your professional performance and competence, plus potential for further learning and professional growth. At least one should be a direct supervisor or former supervisor. Supply the information requested of you below and give this form to the recommender with a standard business envelope in which this form is to be returned to you or directly to the Office of Admission.

Applicant's name \_\_\_\_\_  
last or family name first middle or maiden

Applicant's address \_\_\_\_\_  
street apartment

city state zip

Telephone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

By signing, I agree that the recommendation I am requesting shall be held in confidence by officials of the Simmons School of Management, and I hereby waive any rights to examine it.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

## TO THE RECOMMENDER

The person whose name appears above is applying to the Simmons MBA program. We would appreciate your giving us the following information in as much detail as possible. We particularly need your comments on the candidate's professional accomplishments and leadership potential.

1. How long and in what capacity have you known the candidate? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What do you consider the candidate's most outstanding strengths or characteristics? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What are the candidate's chief areas for development? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4. In your opinion, how well has the candidate considered and prepared for the decision to enter a graduate program in management?  
 \_\_\_\_\_  
 \_\_\_\_\_

5. Please rate this candidate's current abilities.

	Unknown	Below average	Average	Outstanding
Verbal communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conceptual skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problem-solving skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decision-making skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quantitative skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work as a team member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to initiate ideas and actions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to balance conflicting demands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Knowing the candidate as you do, how would you summarize your advice to the Simmons admission committee?

Strongly recommend    Recommend    Cannot recommend

7. Any additional comments you care to make would be appreciated. Please attach separate sheets if you wish.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*For international candidates:* Please comment on the candidate's oral English ability. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Please forward additional information about the Simmons MBA program to me or to members of my organization.

Mailing address \_\_\_\_\_  
street

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

# RECOMMENDATION FORM

**SUBMIT TO:** OFFICE OF ADMISSION SIMMONS SCHOOL OF MANAGEMENT 409 COMMONWEALTH AVENUE BOSTON, MA 02215  
TEL: 617-521-3840 FAX: 617-521-3880 EMAIL: SOMADM@SIMMONS.EDU WEB SITE: WWW.SIMMONS.EDU/SOM

Recommender \_\_\_\_\_

Title \_\_\_\_\_

Company/Organization \_\_\_\_\_

Address of organization \_\_\_\_\_  
street

city state zip

Telephone ( ) \_\_\_\_\_

## TO THE APPLICANT

Request recommendations from two people who can evaluate your professional performance and competence, plus potential for further learning and professional growth. At least one should be a direct supervisor or former supervisor. Supply the information requested of you below and give this form to the recommender with a standard business envelope in which this form is to be returned to you or directly to the Office of Admission.

Applicant's name \_\_\_\_\_  
last or family name first middle or maiden

Applicant's address \_\_\_\_\_  
street apartment

city state zip

Telephone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

By signing, I agree that the recommendation I am requesting shall be held in confidence by officials of the Simmons School of Management, and I hereby waive any rights to examine it.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

## TO THE RECOMMENDER

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\_\_\_\_\_  
\_\_\_\_\_

2. What do you consider the candidate's most outstanding strengths or characteristics? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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	Unknown	Below average	Average	Outstanding
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Conceptual skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problem-solving skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decision-making skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quantitative skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work as a team member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to initiate ideas and actions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Strongly recommend    Recommend    Cannot recommend

7. Any additional comments you care to make would be appreciated. Please attach separate sheets if you wish.

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*For international candidates:* Please comment on the candidate's oral English ability. \_\_\_\_\_

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**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Please forward additional information about the Simmons MBA program to me or to members of my organization.

Mailing address \_\_\_\_\_  
street

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

*Our mission is to educate women for power and principled leadership. Our faculty is committed to advancing knowledge and practice in management through excellence in education and research. Our academic programs offer a rigorous, applied, management education designed for women. We focus on leadership and our programs integrate the strategic, functional, and behavioral aspects of management. Our students gain the knowledge, analytic skills, and confidence that they need to manage successfully in dynamic and global environments. We are invested in our students' success and support them as they launch, advance, and change their careers.*





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School of Management

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Boston, MA 02215

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