

Post-Baccalaureate Certificate Programs Application



HOFSTRA
UNIVERSITY®

How to Apply

Please complete this application and send it with your application fee to:

Office of Graduate Admissions
105 Memorial Hall
126 Hofstra University
Hempstead, NY 11549-1260

General Application Requirements

To apply, submit the following:

- A completed, signed and dated Post-Baccalaureate Certificate Program application.
- A non-refundable \$70 application fee in the form of an applicant's own personal check or money order; cash is not accepted. Checks must be made payable to "Hofstra University."
- Applicants must have completed an undergraduate degree from an accredited university.
- Official Transcripts - must be provided from all post-secondary schools you have previously attended. Contact the institutions directly to obtain these documents.
- Employment history.

Questions?

Please call us at (516) 463-4723 to speak with an advisor.

Post-Baccalaureate Certificate Program

Applicant Information

Last Name First Name Middle Name

Previous Last Name Date Social Security Number

Street Address

City State Zip

Daytime Phone # Evening Phone # Cell Phone #

E-Mail Address

Gender Male Female

Highest education level completed:

Bachelors Degree Masters Degree or higher

I plan to enter Hofstra University in:

Select term: Fall Spring Year

I wish to apply to the following Credit Certificate Program:

- Accounting Certificate Program (ACP - 02-CLU-9801)
- Certificate in Business Computer Information Systems (BCIS - 02-CLU-9823)
- Finance Certificate Program (FCP - 02-CLU-9803)
- General Management Certificate Program (GMCP - 02-CLU-9810)
- Human Resources Management Certificate Program (HRMCP - 02-CLU-9804)
- International Business Certificate Program (IBCP - 02-CLU-9806)
- Labor Studies / Advance Labor Studies Certificate Program (LSCP - 01-CLU-9821)
- Marketing Management / Marketing Media Certificate Program (MCP 02-CLU-9802)

The following 3 items are optional:

1. Are you Hispanic or Latino? Yes No

2. Select one or more races from the following groups:

- American Indian or Alaska Native White Asian
- Native Hawaiian/other Pacific Islander Black or African American

3. What other schools have you applied to?

ADDITIONAL INFORMATION

Have you ever been suspended, expelled or required to withdraw for disciplinary reasons from any high school or college?
 Yes No If "Yes," attach a detailed explanation.

Have you ever been charged with, convicted or, pled guilty or no contest to a felony charge?
 Yes No If "Yes," attach a detailed explanation.

CITIZENSHIP STATUS

Country of birth

- U.S. Citizen U.S. Permanent Resident
- Non-Resident Other

If "Other," indicate country of citizenship and indicate type of visa or permanent resident identification number:

Are you currently living in the U.S.?

Yes No

If "Yes," indicate current visa status:

Post-Baccalaureate Certificate Program

Applicant Name

Last Name First Name Date

Academic Information: List chronologically all post-secondary education (even if you i not complete a degree).
Failure to list all institutions attended after high school constitutes grounds for dismissal.

Have you ever applied to or taken classes at Hofstra University? Yes No Are you currently attending Hofstra University? Yes No

College/University	Dates Attended [MM/YYYY to MM/YYYY]	Major/Field	Degree/Diploma	Degree/Diploma Date Granted	Credits Earned	Grade Point Average
1 <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2 <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3 <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4 <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5 <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Employment History: List the names of organizations, dates of employment and duties with the most recent of relevant experience first.

Organization	Address	Position/Duties	Dates of Employment [MM/YYYY to MM/YYYY]
1 <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2 <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3 <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4 <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5 <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I certify that the information provided by me on this application (including all supplemental pages) is complete and accurate.

Applicant Signature **Date**