

THIS IS A FORM-FILLABLE DOCUMENT. PLEASE ENTER THE REQUESTED INFORMATION AND PRINT A COPY FOR SUBMISSION.

This application form is for students who will be in the graduate MAS Program in Accountancy in the Summer 2010 semester.

Indicate the type of financial aid you seek from the Department (check all that apply):

To be considered for an assistantship, applicants whose native language is not English are required to take the TOEFL Internet-Based Test (iBT). The department needs to receive the score prior to the financial aid deadline.

Assistantship (TA)

Academic merit

Financial need

Diversity (Based on a broad set of criteria. Must complete diversity section below.)

3. TOEFL scores, if applicable: answer must be numeric

Personal Information

4. First Name:

5. Middle Initial (Optional):

6. Last Name:

7. Gender:

Male

Female

8. Permanent Mailing Address:

9. City:

10. State:

11. Zip Code: answer must be a zipcode like 61864 or 61864-8180

12. Telephone #: answer must be numeric

13. Email Address answer must be an email address

Citizenship & Residency Information

14. U.S. Citizen:

Yes

No

15. If yes, type of citizenship:

By birth

By naturalization

16. If naturalized, age at naturalization: answer must be numeric

17. If you are NOT a U.S. citizen, please indicate visa status:

Immigrant visa

Non-immigrant student

Other, please specify

18. If you have an immigrant visa, indicate date visa was granted: answer must be date like mm/dd/yyyy

19. State of Illinois Resident:

Yes

No

Additional Qualifications

20. Indicate and briefly describe activities that demonstrate your leadership skills.

21. Briefly describe your career objectives, both upon graduation and five to ten years after that.

22. Please indicate your involvement in extracurricular activities: list organizations, a brief description of involvement, and hours per semester involved.

23. Please indicate your involvement in community service work: list type of work, a brief description of involvement and hours per semester involved.

24. Please describe talents and awards: list each, a brief description, and the level of your achievement.

Diversity Qualifications

Please answer the following questions if you are applying for a diversity scholarship.

In addition to the information provided below, applicants must also submit two letters of recommendation to the Department of Accountancy by February 1, 2010. The recommendation form is [available online in PDF format](#).

27. Please provide a personal statement with your application. This statement should indicate the ways in which you believe your talents and experiences will contribute to the diversity of the Accountancy graduate student body. You should elaborate on significant personal, academic, and professional experiences; meaningful intellectual interests and extracurricular activities; factors inspiring you to obtain an accountancy education; and significant obstacles, challenges, or disadvantages met and overcome. The form and content of the personal statement are up to you.

28. (Optional) Please indicate your race/ethnicity. This is one of many factors considered in diversity awards.

American Indian/Alaskan Native

Asian or Pacific Islander

Black/African American/Non Hispanic

Latina/Latino

White/Non Hispanic

Race/Ethnicity Unknown

29. If English is not your native language, when did you learn it?

By age 5

During elementary school

During high school

After high school

30. Your country of birth (use abbreviation)

31. Father's occupation (or Legal Guardian):

32. Father's highest level of education.

High School (None)

High School (Some)

High School (Diploma/Degree)

College (None)

College (Some)

College (Diploma/Degree)

33. Father's country of birth (use abbreviation)

34. Mother's occupation (or Legal Guardian):

35. Mother's highest level of education.

High School (None)

High School (Some)

High School (Diploma/Degree)

College (None)

College (Some)

College (Diploma/Degree)

36. Mother's country of birth (use abbreviation)

37. Who has been your primary care giver(s) for most of your life? Check all that apply.

Mother

Father

Grandparent(s)

Other

I understand that withholding pertinent information on this application or giving false information will make me ineligible for financial aid from the Department of Accountancy or subject to dismissal from the program. With this in mind, I certify that the statements and information provided are correct and complete.

Should the Department award a scholarship to me, I hereby authorize the release of my name, address, major and any photograph of me as an award recipient.

Signature

Date