

MS TAX PROGRAM

FOCUSING ON THE COMPLETE TAX PROFESSIONAL

AT ILLINOIS



COLLEGE of
BUSINESS
at ILLINOIS

MS Tax Program at ILLINOIS

University of Illinois at Urbana-Champaign
Illini Center, Fourth Floor
200 S. Wacker Drive
Chicago, IL 60606

Info: (312)575-0909
Fax: (312)575-7909
www.MastersinTax.com

MASTER OF SCIENCE IN TAXATION APPLICATION Applying for classes starting in May ____ (Year)

Please fill out this form and mail or fax it to the above address. Your responses will help to determine admission.

Mr. Ms.

_____ Last

_____ First

_____ Middle

Previous name (Last, First, Middle) _____

UIN (University Identification Number) _____

(If you attended the University of Illinois at Urbana-Champaign, please provide your UIN.)

I. DATE AND PLACE OF BIRTH

Month: _____ Day: _____ Year: _____

City of Birth: _____

State: _____ Country: _____

II. HOME ADDRESS

Street Address: _____

City: _____

State: _____ Postal Code: _____

Home Telephone: _____ Mobile: _____

Home e-mail: _____ Fax: _____

County (Illinois Residents only): _____

III. CURRENT EMPLOYER INFORMATION

Company name: _____

Company address: _____

Work phone: _____

Work e-mail: _____

I prefer to be contacted via:

Work e-mail Personal e-mail

Has your employer agreed to sponsor your participation in this program?

(i.e., agreed to the necessary release-time from work)

Yes No Pending

IV. PROFILE

Gender

Male Female

Marital Status

Single Married

Ethnicity

Ethnic information is requested so that the University may demonstrate its compliance with federal requirements.

Failure to respond will not affect this application.

Please check the one race/ethnic group with which you most identify:

- 1—American Indian or Alaskan Native
- 2—Asian or Pacific Islander
- 3—Black / African American / Non-Hispanic
- 4—Hispanic / Latino(a)
- 4C—Cuban
- 4P—Puerto Rican (mainland)
- 4R—Puerto Rican (commonwealth)
- 4Y—Puerto Rican (other)
- 4Z—Other Hispanic or Latino(a)
- 5—White, Non Hispanic
- 6—Prefer not to specify

V. PREVIOUS UNIVERISTY OF ILLINOIS EXPERIENCE

Have you applied for graduate study at the University of Illinois at Urbana-Champaign within the past 12 months?

Yes No

Have you ever attended or taken courses at this University?

Yes No

If yes, give date of last term: _____

Were you pursuing a degree?

Yes No

VI. FINANCIAL SUPPORT

Will you be receiving financial support or sponsorship from a company, the military, or student loans?

Yes No

If yes, please specify: _____

VII. RECOMMENDATION LETTERS

List below the names of the people who are providing recommendation letters..

1. Name: _____

Title: _____

Address: _____

Phone: _____

2. Name: _____

Title: _____

Address: _____

Phone: _____

VIII. CITIZENSHIP

U.S. Citizen Permanent Resident

Citizen of: _____

(Please submit a copy of your alien registration card with application.)

(U.S. Citizens/ Permanent Residents, please disregard the remainder of Citizenship section.)

International

Country of Citizenship: _____

Country of Permanent Residence: _____

Your native language:

English Other (specify): _____

If other, please indicate the number of continuous years out of the past five year you have worked or studied in an environment where English is the primary language: _____ years.

If you are currently in the U.S. on a nonimmigrant status, please indicate type:

F-1 Date I-94 expires: _____

F-2

J-1 Name of Sponsor: _____

J-2

Other Specify: _____

If you are currently in the U.S. but are not on a Visa, indicate non-Citizen or non-Permanent Resident status.

Asylee

Refugee

Undocumented Resident

Request for Visa Eligibility Documents

Request visa eligibility documents from the University of Illinois at Urbana-Champaign by indicating visa type

F-1

J-1 Program Sponsor: _____

I do not need visa eligibility documents

IX. TEST SCORES

TOEFL or IELTS

Name used when registering: _____

Registration number: _____

Test date: _____

Computer Based Test?

Yes No

SCORE

Listening: _____

Structure: _____

Reading: _____

Total: _____

X. PROFESSIONAL WORK EXPERIENCE *(please list most recent first; resume may be submitted instead):*

Employer	Dates	Position and primary duties*
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Briefly describe the nature and extent of your taxation experience, where applicable.*

XI. ALL EDUCATIONAL EXPERIENCE *(please list even though you are submitting transcripts):*

University/College/Organization	Dates attended	Degree/Program
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

XII. EDUCATIONAL GOALS AND OBJECTIVES *(please be complete; attach additional pages as required):*

You should also convey how you believe this program will influence and further your career objectives.

I certify that all information in this application is true and complete and that I am the author of my educational goals and objectives statement. I understand that the University of Illinois may verify any information I have provided. Falsification or omission of information and credentials may result in the withdrawal of my application or the revocation of admissions, financial award, or registration. I understand all credentials I submit become the property of the University of Illinois.

Signature: _____

Date: _____

Print name: _____

XIII. MARKETING FEEDBACK

Please indicate how you became aware of the MS Tax Program at ILLINOIS (*check all that apply*):

- | | |
|---|---|
| <input type="checkbox"/> <i>The Wall Street Journal</i> | <input type="checkbox"/> Other ILLINOIS alumni |
| <input type="checkbox"/> <i>Crain's</i> | <input type="checkbox"/> MS Tax Program email |
| <input type="checkbox"/> Direct mail | <input type="checkbox"/> MS Tax Program website |
| <input type="checkbox"/> MS Tax student: _____ | <input type="checkbox"/> Other website: _____ |
| <input type="checkbox"/> MS Tax alumni: _____ | <input type="checkbox"/> Other : _____ |
| <input type="checkbox"/> Information Session | <input type="checkbox"/> Radio advertisement |
| <input type="checkbox"/> <i>Chicago Tribune</i> | |

XIV. CHECKLIST

- Completed application form
- Resumé
- Official transcripts sent directly from each university/ college attended with university seal or signature across envelope flap
- 2 letters of recommendation
- Sponsorship letter
- Personal interview—To be scheduled by calling (312) 575-0909

ADDITIONAL REQUIREMENTS PERTAINING TO APPLICANTS WITH NON-U.S. DEGREES:

- Original diploma/degree certificate from institutions outside the U.S.
- Official translation for non-English language transcripts and diplomas
- Declaration of Financial Certification Form and bank statements (international applicants only)
- TOEFL or IELTS (if required) forwarded by Education Testing Service to the University of Illinois—School code 1836
- Photocopy of TOEFL or IELTS score (if TOEFL or IELTS required)

SEND COMPLETED APPLICATION AND SUPPLEMENTAL MATERIALS TO:

MS TAX PROGRAM
ILLINI CENTER, FOURTH FLOOR
200 SOUTH WACKER DRIVE
CHICAGO, ILLINOIS 60606