

To apply to the program, you must complete the following requirements:

Completed Application Form

Résumé or CV

One self-nomination letter describing:

- Current job responsibilities and assignments
- Finest achievements and greatest disappointments
- Challenges met within current organization
- Civic and community activities and any offices held
- Reasons and motivations for entering the MSPBA program
- Professional and personal goals and plans

Two letters of professional references

College or university transcripts

Graduate school admission exam scores (recommended)

- GMAT

TOEFL or the IELTS examination (for anyone who speaks English as a second language)

In-person interview with MSPBA program representatives.

Applicants will be contacted for scheduling of an on-site interview following receipt of complete packet of information



Download an electronic PDF of the application here: www.mspba.pitt.edu/apply-now

This application is for the MSPBA program with classes starting in the year _____.

General Information

Name: _____ Nickname: _____
LAST FIRST MIDDLE

Home Address: _____
NUMBER STREET

CITY STATE POSTAL CODE COUNTRY

Home Phone: _____ E-mail: _____

Cell Phone: _____ Birthdate (MM-DD-YYYY): _____

Are you of Hispanic or Latino ethnicity (meaning a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race)? yes no

Please select one or more race(s)/ethnicity(ies) from the following groups that you identify with: American Indian or Alaskan Native Asian African American Native Hawaiian or Other Pacific Islander White

What is your citizenship? _____ Do you hold any visas? _____

LinkedIn Profile Address _____ Skype User Name _____

Company Information

Company/Organization Name: _____

Division: _____

Business Address: _____
NUMBER STREET P.O. BOX

CITY STATE POSTAL CODE COUNTRY

Telephone: _____ Fax: _____ E-mail: _____

Type of Industry: _____ Annual Sales: _____

Please check the range that best describes the size of your company:

- Fewer than 100 500-999 employees 10,000-99,999 employees
- 100-499 employees 1,000-9,999 employees More than 100,000 employees

Professional Information

Total years of professional experience: _____ Length of time in management position: _____

Current Title: _____ Since: _____ Number of persons supervised directly: _____

Please indicate your annual compensation (for statistical purposes only):

Base Salary (in US Dollars) \$ _____ + Other Compensation \$ _____ = Total \$ _____

Please describe your major area(s) of responsibility:

Name and Title of Immediate Supervisor: _____

Supervisor's Business Address: _____
NUMBER STREET

CITY STATE POSTAL CODE COUNTRY

Supervisor's Telephone: _____ Fax: _____

Academic Background

List in order, beginning with the earliest, all academic work since high school:

College or University: _____ Location: _____

Dates attended: _____ to _____ Major: _____

QPA: _____ Degree and Date: _____

College or University: _____ Location: _____

Dates attended: _____ to _____ Major: _____

QPA: _____ Degree and Date: _____

College or University: _____ Location: _____

Dates attended: _____ to _____ Major: _____

QPA: _____ Degree and Date: _____

Supplementary Materials

Transcripts: Enclosed Will be sent

The following individuals will be asked to submit letters of recommendation:

Name: _____ Title: _____

Position Relative to Applicant: _____ Telephone: _____

Name: _____ Title: _____

Position Relative to Applicant: _____ Telephone: _____

Sources of Support

Check the support you expect from your employer: Total tuition Part tuition _____ (%) Time off only Uncertain

By signing this application, I attest that all information given above is true to the best of my knowledge.

Signature of Applicant: _____ Date: _____

Mail or Email Application to:

University of Pittsburgh
Bridget Regan
721 Salk Hall
3501 Terrace Street
Pittsburgh, PA 15213
Tel: 412-648-8565
Email: btwalker@pitt.edu



University of Pittsburgh

PittPharmacy

KATZ JOSEPH M. KATZ
GRADUATE SCHOOL
OF BUSINESS

TO THE APPLICANT:

Please complete the front side of this form and forward it to the person who will be providing a letter of recommendation for you.

Applicant's Name _____
LAST FIRST MIDDLE

Home Address _____
NUMBER STREET P.O. BOX

CITY STATE POSTAL CODE COUNTRY

Applying for MSPBA class in Pittsburgh starting in the year _____ .

Please complete by (date) _____.

If you become a student with the MSPBA, the Education Rights and Privacy Act of 1974 will apply to you. This act will afford you the right of access to your educational records only after entering the MSPBA program.

Please check the appropriate box below to indicate whether you waive or do not waive your right of access to this letter of recommendation.

I hereby waive my right of access to this letter of recommendation.

I do not waive my right of access to this letter of recommendation

Applicant's Signature _____ Date _____

TO THE RECOMMENDING INDIVIDUAL:

The University of Pittsburgh School of Pharmacy and Joseph M. Katz Graduate School of Business sponsor this unique program that enable the working executive to earn a Master of Science in Pharmacy Business Administration (MSPBA) degree. Students work as part of a cohort group, within a peer learning environment.

You have been asked to write a letter of recommendation for the applicant listed above, who has applied for admission to our MSPBA program. To make this educational experience meaningful to both this applicant and other executives in the program, we ask that you be as realistic and factual as possible in your nomination.

Your letter should be sent directly to the MSPBA program location listed on the back of this sheet. Should you require additional information on the program, please feel free to contact us.



PLEASE ADDRESS THE FOLLOWING IN YOUR LETTER OF RECOMMENDATION:

1. How long and in what capacity have you known the applicant?
2. What is the nature of the applicant's current position, and what is the level of responsibility involved?
3. What is your appraisal of the applicant's current job performance?
4. What is the applicant's management potential, and in what areas of the organization do you see the applicant advancing?
5. How will the applicant benefit from the Executive MBA program?
6. Do you feel that the applicant has the educational background, capabilities, and problem-solving skills required to successfully complete a rigorous MBA program?
7. What are the applicant's strengths and weaknesses in the following areas?
 - a. Written communications
 - b. Oral communications
 - c. Reading speed and comprehension
 - d. Mathematical ability (The Katz School's Executive MBA program includes extensive advanced quantitative coursework.)
 - e. For international applicants, English language proficiency
8. Was enrollment in the program initiated by the applicant, or was it suggested by others in the applicant's organization? In your opinion, is the applicant personally motivated to attend and complete the program?
9. Is the applicant's work or travel schedule likely to interfere with studying or program attendance?
10. Will your organization give its complete support to the applicant's participation in the Executive MBA program?

PLEASE SEND YOUR LETTER OF RECOMMENDATION WITH THIS FORM DIRECTLY TO:

University of Pittsburgh
Bridget Regan
721 Salk Hall
3501 Terrace Street
Pittsburgh, PA 15213

Tel: 412-648-8565
Email: btwalker@pitt.edu

