



**APPLICATION FOR ADMISSION
UNDERGRADUATE
ENTREPRENEURSHIP PROGRAM**

*Center for Innovation & Entrepreneurship
Santa Clara University*

<i>For Office Use Only</i> Admit Date: _____ DB: _____ Folder: _____ GW: _____ Picture: _____ Transcripts: _____ Letter: _____

Date: _____

Full Name: _____
Last First M.I.

Graduating Year: _____

Student ID # _____

Residential Learning Community: _____

School Address: _____

City, State & Zip: _____ **School Phone:** (____) _____

E-Mail: _____ **Other Phone:** (____) _____

Parent's Address: _____

City, State & Zip: _____ **Parent's Phone:** (____) _____

Please Circle: FRESHMAN SOPHOMORE JUNIOR SENIOR **Current GPA:** _____

Major(s): _____

Minor(s): _____

Certificate(s): _____

List Your Work Experience:

YEAR	ORGANIZATION	POSITION
_____	_____	_____
_____	_____	_____
_____	_____	_____

List Your School Activities (High School and College):

Please complete the following self assessment by checking the level which best describes you in regard to each characteristic:

SELF ASSESSMENT

CHARACTERISTIC	VERY STRONG						VERY WEAK	
	8	7	6	5	4	3	2	1
ASSERTIVENESS								
LEADERSHIP								
INITIATIVE								
COMMUNICATION								
ANALYTICAL SKILL								
CREATIVITY								
ORGANIZATION								
SELF-DISCIPLINE								

Interested in Studying Abroad (Yes/No) _____ Interested in a Mentor (Yes/No) _____

Please answer the following question to the best of your ability:

Why are you interested in the Entrepreneurship Program?

Please sign here to authorize CIE to obtain a copy of your transcripts (required for admission):

_____ Signature

_____ Date

Please return to CIE, Lucas Hall, Suite 111. Thank you for your time and interest!