

# KELLOGG EXECUTIVE PROGRAMS APPLICATION FORM

Fields with asterisks \* are required for submission.

\*Program Name: \_\_\_\_\_

\*Start Date: \_\_\_\_\_ Registration Code (if applicable): \_\_\_\_\_

## Application Information

\*Prefix: \_\_\_\_\_ \*First (Given) Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

\*Last (Family) Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Preferred First Name/Nickname: \_\_\_\_\_ \*Gender:  Male  Female

Date of Birth: \_\_\_\_\_ \*Country of Origin: \_\_\_\_\_

\*Preferred Email: \_\_\_\_\_

*(A valid and unique email is required for each participant as most program communication is sent by email. Please **do not** use the same email address for multiple applicants. Doing this will overwrite the name currently in our registration system.)*

## Organization Information

\*Company/Organization: \_\_\_\_\_ \*Organization Type: \_\_\_\_\_

Website: \_\_\_\_\_

## Current Position Information

\*Position Title: \_\_\_\_\_

\*Management Level: \_\_\_\_\_

\*Position Function: \_\_\_\_\_

\*Industry Group: \_\_\_\_\_

\*Industry (please specify): \_\_\_\_\_

\*Parent Company Annual Sales (in \$US): \_\_\_\_\_

\*Parent Company Number of Employees: \_\_\_\_\_

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## Business Contact Information

\*Office Address

Line 1: \_\_\_\_\_ (Street Address) Line 2: \_\_\_\_\_ (Optional – Suite #, etc.)

\*Country: \_\_\_\_\_ \*City: \_\_\_\_\_

\*State/Province: \_\_\_\_\_ \*Postal Code: \_\_\_\_\_

\*Office Phone: \_\_\_\_\_ Mobile/Cell: \_\_\_\_\_

## Home Contact Information

\*Home Address

Line 1: \_\_\_\_\_ (Street Address) Line 2: \_\_\_\_\_ (Optional – Suite #, etc.)

\*Country: \_\_\_\_\_ \*City: \_\_\_\_\_

\*State/Province: \_\_\_\_\_ \*Postal Code: \_\_\_\_\_

\*Home Phone: \_\_\_\_\_ Mobile/Cell: \_\_\_\_\_

## Preferences

\*Preferred Mailing Address:  Business Address  Home Address

To facilitate networking opportunities Kellogg will distribute a list containing the contact information of this session's participants to each attendee. If you prefer to have your mailing address and phone number withheld from the participant list please check the following box. (View Privacy Policy)

Please withhold my mailing address from the participant list.

## Experience Information

\*Highest level of education attained: \_\_\_\_\_ Number of years  
\*full-time work experience: \_\_\_\_\_ \*Management experience: \_\_\_\_\_

Are you an alumnus of any of the following Kellogg programs?

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## Education History

\*School Name: \_\_\_\_\_

\*Degree Conferred: \_\_\_\_\_ \*Major: \_\_\_\_\_

Start Date: \_\_\_\_\_ \*Date Degree Conferred: \_\_\_\_\_

## Executive Education Experience

Name of University: \_\_\_\_\_

Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Program Name: \_\_\_\_\_

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## Personal Background and Community involvement

\*Describe formative life experiences that have shaped your approach to leadership:

\*Briefly describe your interests outside of work, community involvement and/or civic engagement:

## Responsibilities and Program Expectations

\*To what unit in the organization do you report?

\*Number of employees who report to you and your direct reports?

\*Number of levels between you and your CEO/your parent company's CEO?

\*Total annual compensation including bonus and incentives (in \$US)

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\*Describe the unit for which you are responsible and your current responsibilities. Please include financial impact to the organization. If you are applying for AMP: The Global Experience, please also describe any relevant experience you have regarding conducting business with international markets.

\*What is it about Kellogg's Advanced Management Program design that attracts your application?

\*What is it you hope to learn and take away from Kellogg's Advanced Management Program?

\*Please summarize some of the major challenges your organization is experiencing that you hope Kellogg can partner with you to address.

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## Management Skills Proficiency

Please indicate your proficiency in the following areas of management:

\*Accounting

\*Finance

\*Information Technology

\*Managing Change

\*Marketing and Sales

\*Operations/Manufacturing

\*People Management

\*Strategic Management

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## English Proficiency

Is English your first language? Yes No

If English is not your first language, please indicate your proficiency level and see requirements on the page below:

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**Here are Kellogg's Expectations for English fluency: (Please respond by selecting 1-5 to each question if English is not your first language)**

1. Can read business articles in English with easy or moderate difficulty
2. Have used spoken English in a wide range of sophisticated and demanding responsibilities in your job
3. Has given clear, logically organized explanations in spoken English to support own point of view
4. When speaking, is able to use simple and complex grammar correctly, except for the occasional error
5. When listening to spoken English, can completely understand native and non-native English speakers, including idioms, humor, and irony even when speaking very fast
6. Usually knows the English vocabulary to use to convey desired meaning
7. Has confidence in own English speaking and listening skills

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**To maximize your AMP experience and that of your classmates, you must be prepared to:**

1. Contribute regularly to general classroom discussion
2. Participate actively in one-on-one conversations with an assigned learning partner as well as in small group (4-6 people) discussions where your contribution is essential to the success of the group
3. Participate and interact in English in social activities and networking
4. Embrace Kellogg's interactive, discussion-based learning style
5. Maintain energy over the course of a rigorous schedule in English that includes 8-hour or longer days

I have read and understand these expectations and believe I can fully participate in and benefit from Kellogg's Executive Development Program

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## Sponsoring Executive Information

In order to attend this program, a sponsor (a senior executive within your organization who is familiar with your work) is recommended. Your sponsor should authorize you the time off needed to complete the program.

By submitting this application, you acknowledge that the sponsoring executive listed below has agreed to nominate you for this program.

\*Prefix: \_\_\_\_\_ \*First (Given) Name: \_\_\_\_\_ \*Last (Family) Name: \_\_\_\_\_

\*Company: \_\_\_\_\_ \*Position Title: \_\_\_\_\_

\*Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

\*Office Address

Line 1: \_\_\_\_\_ (Street Address) Line 2: \_\_\_\_\_ (Optional – Suite #, etc.)

\*Country: \_\_\_\_\_ \*City: \_\_\_\_\_

\*State/Province: \_\_\_\_\_ \*Postal Code: \_\_\_\_\_

## Executive Development Contact

Prefix: \_\_\_\_\_ First (Given) Name: \_\_\_\_\_ Last (Family) Name: \_\_\_\_\_

Company: \_\_\_\_\_ Position Title: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Office Address

Line 1: \_\_\_\_\_ (Street Address) Line 2: \_\_\_\_\_ (Optional – Suite #, etc.)

Country: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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## Emergency Contact

Provide the name and at least one phone number of a person to contact in case of emergency while you are on campus.

\*Name: \_\_\_\_\_

\*Relationship: \_\_\_\_\_ \*Phone: \_\_\_\_\_

\*Insurance Provider: \_\_\_\_\_

\*Is your insurance valid in the United States?  Yes  No

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## Payment and Admissions Policies

**General:** Applicants must be proficient in English. All classes and discussions are conducted in English.

It is understood that, during attendance at this program, the participant will be free of other duties and will not leave except in emergency situations.

Northwestern University reserves the right to use photos taken during seminar activities for promotional and educational purposes.

**Health Insurance:** It is expected that participants have their own health insurance, valid in the United States. The University is not responsible for medical expenses incurred by participants during the program.

**Lodging and Meals:** Program fees include most meals, coffee breaks and any receptions. Participants may be responsible for dinner on free evenings. Vegetarian options are available at all meals and breaks during our programs.

Unless otherwise specified, lodging is included starting the first day of the program and ending the final day of the program. Rooms are automatically reserved for program participants as described below:

**Evanston Campus:** Participants of programs held on the Evanston campus typically stay at the Allen Center. Occasionally, demand for a program requires that participants stay at a nearby hotel. In that case all transportation to and from the Allen Center will be handled by Kellogg.

**Miami Campus:** Participants of programs held on the Miami campus stay at the Hyatt Regency Coral Gables directly adjacent to our classroom facilities.

**Chicago Campus:** Participants are responsible for their own accommodations. Please contact your program manager for hotel suggestions.

### Can I make arrangements to arrive the night before the program starts?

Contact your program manager to inquire about room availability and fees. If you do not have your program manager's contact information, please phone our main office at 847.467.7026.

**Payment:** Payment is due upon receipt of invoice.

- Check: Checks must be drawn on U.S. banks and payable in U.S. funds to "Northwestern University".
- Wire Transfer: Wire transfers must be accompanied by our bank information available on the invoice or by contacting our registrar at Exed-registrar@kellogg.northwestern.edu
- Credit Card: We accept Visa, MasterCard, Discover and American Express for all our programs.

### Can I pay online?

Online payment by credit card is allowed at the time of the registration unless the program has admission requirements, special pricing or is at capacity.

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## **Cancellation Policy**

**Cancellations:** Because attendance at a Kellogg School executive program requires significant advance preparation and demand often exceeds capacity, it is important that you contact us in a timely manner if you must cancel or defer your attendance. To receive a full refund of tuition, notice of cancellation must be received more than 30 days in advance of the program start date. Participants who cancel less than 30 days in advance will not receive a refund but may nominate an acceptable substitute or attend a future session of the same program within one year.

Northwestern University reserves the right to cancel a program at any time for any reason. In the unlikely event of a course cancellation, paid program fees will be refunded, but the university is not responsible for any travel or other related expenses accrued by the program registrant.

**University Policies:** Northwestern University is an equal opportunity, affirmative action educator and employer.

Northwestern University reserves the right to change, without notice, any statement in this publication concerning, but not limited to, rules, policies, tuition, fees, curricula, and courses.

Self-identification of birth date is entirely voluntary.

*\* By typing my name below I certify that I have read and understood the policy statements above and that all information and accompanying material provided in connection with this application are authentic and accurate.*

*\*Applicant Name:* \_\_\_\_\_

**This application can be submitted to Executive Education as below:**

### **Submit by Mail to:**

Executive Education, Kellogg School of Management  
Northwestern University  
James L. Allen Center  
2169 Campus Drive  
Evanston, Illinois 60208-2800, U.S.A.

**Submit by Fax to:** 847-491-8002

**Submit by Email to:** ExecEd@kellogg.northwestern.edu