

*Fields with asterisks * are required for submission.*

*Program Name: _____

*Session Dates: _____ Registration Code (if applicable): _____

Applicant Information

*Prefix: _____ *First (Given) Name: _____ Middle Name: _____

*Last (Family) Name: _____ Suffix: _____

Preferred First Name for Name Badge: _____ *Gender: _____

Date of Birth: _____ *Country of Citizenship: _____

*Preferred Email: _____

Secondary Email: _____

*Preferred Phone: _____

Secondary Phone: _____

Work Address Use as primary address

*Country: _____

*Line 1: _____

Line 2: _____

*City: _____ *State/Province: _____ *Postal Code: _____

Home Address Use as primary address

Country: _____

Line 1: _____

Line 2: _____

City: _____ State/Province: _____ Postal Code: _____

*Group Registration: Yes No *Have you attended a Kellogg Executive Education program? Yes No

*Federal Government Employee: Yes No

If applicable, enter Assistant or Administrator information

The assistant or administrator will receive a copy of the registrant's confirmation email and be able to view the registration details.

First Name: _____ Last Name: _____

Email Address: _____

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How Did You Hear About Us? (please choose all that apply):

Alumni of Northwestern (including Kellogg)

Previously attended Kellogg Executive Education Program

Brochure, letter or postcard

Email

Internet search

Online advertising

Referred by a friend/colleague/supervisor

Professional Information

*Company: _____

Organization Type: _____

*Position Title: _____

*Management Level: _____

*Position Function: _____

Industry Group: _____

Industry: _____

Parent Company Annual Sales (in \$US): _____

Parent Company Number of Employees: _____

Highest Level of Education Attained: _____

Number of Years Full-Time Work Experience: _____

Number of Years Management Experience: _____

Bill to Information (if different from Applicant Information)

Bill to Name: _____

Bill to Email: _____

Bill to Address Line 1: _____

Bill to Address Line 2: _____

Bill to City: _____

Bill to State: _____

Bill to Zip Code: _____

Bill to Country: _____

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Family Enterprise Name if different than Company

***Your Role with the family/company (mark all the categories that apply to you personally)**

Family member executive

Family member owner or future owner (not employed in the business)

Non-family executive

Non-family/independent director

Member of the family that owns the company

Shareholder

Executive in the operating business

Director on the board of the business

Member of the Family Council

Trustee

Director on the board of the family philanthropic foundation

Executive in the family office

Other

***What generation # are you in the family business?**

Gen 1

Gen 2

Gen 3

Gen 4

Gen 5

Gen 6

Gen 7 or more

N/A

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Terms and Conditions

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 personal and professional duties and will not leave except in emergency situations to avoid disruption to fellow participants.

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.

Evanston Campus: Lodging/accommodations are included during the program. Evanston campus participants typically stay at the Allen Center and a room will be reserved for you.

Chicago Campus: Chicago campus participants are responsible for their own accommodations.

Miami Campus: Miami campus participants are responsible for their own accommodations.

Payment: Full payment is due within 30 days of the invoice date. If the participant is enrolling within 30 days of the program's start date, full payment is due immediately.

- 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-payments@kellogg.northwestern.edu
- Credit Card: We accept Visa, MasterCard, Discover and American Express for all our programs.

Online payment: Online payment by credit card is allowed upon receipt of invoice unless the program has admission requirements, special pricing or is at capacity.

Cancellations: To receive a full refund of fees, 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.

No right, title, or interest in any such Northwestern Intellectual Property shall pass to program participants. Participants shall not themselves or knowingly permit any other party to copy, edit, revise, modify, sell, publish, transmit, disclose, display, sublicense, assign, reverse-engineer, reverse compile, hypothecate, participate in the transfer or sale of, reproduce, create derivative works from, distribute, perform, or in any way exploit the Northwestern Intellectual Property or any portion thereof, or permit use of or access to the Northwestern Intellectual Property. Participants shall not in any way remove or alter any copyright notices contained in the program Materials and shall not record or transmit, or permit any personnel to record or transmit, Northwestern's provision of the program without the prior written consent of the owner.

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:** _____

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