

EMBA THE EXECUTIVE MBA PROGRAM

Candidate's Name _____
 (print or type) (Last, First, Middle)

TO BE COMPLETED BY EMPLOYER

Candidates for the Executive MBA require a support statement from their employer acknowledging that the candidate will be given the necessary time off from work to attend classes and other official program functions. Please provide the information requested below and mail to EMBA Admissions using the postage-paid envelope provided.

As a sponsor, I acknowledge that the candidate listed above will be given the necessary time off to attend classes and other official program functions if accepted to the Executive MBA program at Loyola Marymount University.

Name (print or type) _____

Position/Title _____

Office Phone _____ Email _____

Company _____

Address _____

City _____ State _____ Zip _____

If financial support will be provided to the candidate, please indicate the extent (%) of support _____

Signature _____ Date _____

USE ENVELOPE PROVIDED AND SEND TO:

EMBA Admissions
 Center for Executive Learning
 Loyola Marymount University
 1 LMU Drive, MS 8386
 Los Angeles, CA 90045-2659

Toll Free (877) LMU-8585
 Fax (310) 338-1890
 e-mail emba@lmu.edu