



**Application for Health Systems Administration  
MS, Advanced Certificate Healing Hospitality**

Please review application instructions and print or type all responses. Questions regarding the program and application process should be directed to **Dr. Linda Underhill, Program Chair, Health Systems Administration, [lmuis@rit.edu](mailto:lmuis@rit.edu), (585) 475-7359.**

Return application and supporting documents to:

**Graduate Enrollment Services  
Rochester Institute of Technology  
58 Lomb Memorial Drive  
Rochester, New York 14623  
Phone: (585) 475-2229 Fax: (585) 475-7164  
Email: [gradinfo@rit.edu](mailto:gradinfo@rit.edu)**

Indicate which program applying for:  
MS Executive leader Program \_\_\_\_\_

**Name**

\_\_\_\_\_

Last

First

Middle

**Mailing  
Address**

\_\_\_\_\_

Number and Street

\_\_\_\_\_

City

State

Zip Code

**Telephone**

\_\_\_\_\_

Home Telephone

\_\_\_\_\_

Business Telephone

**E-mail  
and fax**

\_\_\_\_\_

E-mail Address

\_\_\_\_\_

Fax Number

**Birthdate**

Month  
[ ][ ]

Day  
[ ][ ]

Year  
[ ][ ]

Birth Date

Male  
[ ]

Female  
[ ]

Gender

**Program  
of Study**

- Health Systems Administration M.S.
- Social Security Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_

When do you plan to begin your studies? \_\_\_\_\_  
Month Year

## Education

Please list all colleges, universities, and graduate schools you have attended:

Name of Institution	City, State, Country	Start Date	End Date	Degree(s) Received or Expected & Date	Major Field

Please list any undergraduate and/or graduate-level courses that you are currently completing or will complete before enrolling in the Health Systems Administration program:

Course Title	Name of Institution

## Work Experience/Personal Data

Please attach a resume outlining full-time, part-time, and summer employment (include military service) as well as academic or professional honors, published works and leadership roles.

## Personal Statement of Educational Objectives

**Please provide a personal statement describing your educational objectives.** You may wish to address: (1) why you are applying for the Health Systems Administration program, (2) how your degree program will relate to your long-range career objectives, (3) what personal or “non-academic” qualities you will contribute to the learning environment in your program, (4) what prior experience you have with respect to your chosen program, and (5) specifically why you want to attend the RIT/Cleveland Clinic program.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
*My signature above indicates that all information provided in this application is complete, factually correct, and honestly prepared.*