

**COLLEGE OF BUSINESS – Ph.D. PROGRAM**

**Supplementary Information Sheet  
FORM A**

Date Submitted \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Student ID Number

To assist us in assembling your file and routing it to the correct department, we need to have the following information:

**I. Three Doctoral Applicant Evaluation Forms (FORM B): Please provide the following information for each of the three persons submitting evaluations:**

**Name Title Address**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**II. Indicate your proposed major area (check one):**

\_\_\_ Accounting

\_\_\_ Management

\_\_\_ Finance

\_\_\_ Marketing & Logistics

\_\_\_ Information Systems

\_\_\_ Management Science

**III. A statement of purpose setting forth your reasons for pursuing doctoral study, personal objectives and career plans.**

**IV. A current vita.**

**V. How or where did you hear about our Ph.D. program?**

Please mail this information to this address as soon as possible.

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