



TEXAS TECH UNIVERSITY
TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER

Health Organization Management

Application for HOM Concentration

Date of Application _____

Name _____

Last

First

Middle Initial

TTU ID _____ Semester _____

Undergraduate GPA _____ Current Graduate GPA _____ GMAT Score _____

MBA Area of Study _____ Targeted Graduation Date _____

What are your career and personal objectives related to seeking this concentration?

Describe your experiences that you consider are relevant this concentration.

For office use only

PharmD _____ MD _____

Approved

Denied

HOM Director Signature

Date