

ENDICOTT COLLEGE  
JENMARC-PRISM  
CONSULTANTS IN EDUCATION  
P. O. BOX 663, Brockton, MA 02303

Phone: 508.586.3574

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PRE-APPLICATION FORM  
FOR  
M ED IN ORGANIZATIONAL MANAGEMENT

NAME \_\_\_\_\_  
Last First Middle/Other

SOCIAL SECURITY NUMBER: \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Number Street Apt/Unit  
\_\_\_\_\_  
City/Town State Zip Code

PHONES: Home: \_\_\_\_\_ Cell \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**Program Permission Disclaimer:**

I understand that the M ED Degree program is under all regulations set by **Endicott College**. I further understand that all application materials must be sent directly to Jon L. Jenmarc, Incorporated, P. O. BOX 663, Brockton, MA 02303-0663, ATT: M ED in Sport Management Program Director.

I grant permission to the Jenmarc designee of **Endicott College** to compile all my records and official transcripts and to forward my completed application folder to the Admissions office at **Endicott College**.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date