



**MEMORIAL
UNIVERSITY**

FACULTY OF BUSINESS
ADMINISTRATION

Course Based Masters Programs

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**Master of Business Administration in
Social Enterprise and Entrepreneurship (MBA-SEE)
Employment/Volunteer Experience Form**

Name of Applicant _____ **MUN Number** _____

Along with this form, applicants must submit a letter from their employer(s), preferably the most recent, providing proof of at least **two years of full-time work experience or equivalent work and volunteer experience**. If unable to obtain a letter from an employer, the applicant must have this completed Employment/Volunteer Experience Form sworn to before a Commissioner of Oaths, Notary Public or Justice of the Peace or other legal authority (email the academic programs office at busigrad@mun.ca for this additional form, if necessary). If space provided is insufficient, please attach an extra sheet.

PAID EMPLOYMENT: From Mth/Yr To Mth/Yr	Position Title	Name and Address of Employer	Total Months
		Total months of full-time work :	

VOLUNTEER WORK: From Mth/Yr To Mth/Yr	Hrs/ week	Position Title	Name and Address of Organization/Charity	Total Months
Total months of full-time volunteering: (eg. 5 hrs/wk = 20 hrs/mth X 10 mths = 200 hrs. Then 200 ÷ 40 hrs = 5 wks)				

I certify that the information provided is correct. If the information is subsequently proven to be incorrect, it may invalidate an offer of admission to the MBA-SEE program.

Applicant's Signature: _____ Date: _____