The 5-year Bachelor /MHA program has been designed so that students can obtain a bachelors degree and a master of health administration in 5 years. This program can be completed with four years of undergraduate work, and one year of graduate work (the last year enrolled formally as a student in the Cornell Graduate School).

It is best if a student decides in the freshman or sophomore year to participate in this program so they can start taking courses that will help them through the program and processes. Students formally apply for admission in their junior year. If a student decides in their senior year not to complete the graduate program, they will have earned a Bachelors at the end of that year.

Undergraduate student ____________________________ is applying for entrance into the 5-year Bachelors /MHA.

As part of the acceptance process, a satisfactory recommendation is required from the applying student’s current faculty advisor. Please enter the requested information below and email to sloan@cornell.edu with “Faculty Advisor Recommendation: Applicant Name” in the Subject line, or mail to Sloan Admissions, MVR 2305. Thank you.

• Do you think this student will have the necessary maturity level to perform in a professional manner in carrying out the responsibilities of this program, and that he/she will be a positive representative of the program?
  Definitely   yes   maybe   probably not

• Do you think this student has the intellectual capacity to complete a graduate degree program?
  Definitely   yes   maybe   probably not

• Do you think this student should be accepted into the 5-year Bachelors /MHA program?
  Definitely   yes   maybe   probably not
Based on your review of this student’s course work plan, and the necessity to have completed 30 hours of Sloan required courses by the end of his/her senior year, will this student be able to complete his/her bachelor’s degree on time and without undue hardship?

Yes  Only under special circumstances  No

If you chose “Only under special circumstances,” please indicate what those circumstances are:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please enter below any comments you feel are pertinent to this students being accepted into the 5-year Bachelors /MHA degree program. The space below may be used for a recommendation statement.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

If you have any questions, please contact Sloan Associate Director, Julie Carmalt at jhc48@cornell.edu, 607-255-2502 or sloan@cornell.edu.

________________________________________________________________________

Undergraduate Faculty Advisor signature  Date