



**CONFIDENTIAL:** The information you provide below is for use by the Admissions Committee only.

**ORGANIZATION**

	YOUR ULTIMATE PARENT COMPANY	YOUR COMPANY/DIVISION
Products/Services:		
Annual Sales Volume (in RMB):	□□□,□□□,□□□,□□□	□□□,□□□,□□□,□□□

Number of Employees: \_\_\_\_\_  
How many employees are under your direct supervision? \_\_\_\_\_  
How many reporting levels are above you, including the CEO of the parent company? \_\_\_\_\_  
What is the title of the person to whom you report? \_\_\_\_\_  
Please describe your organizational hierarchy or provide an organizational chart. \_\_\_\_\_

**PLEASE CHECK YOUR CURRENT INDUSTRY (check one only):**

**Manufacturing**

- Aerospace/Automotive/Transportation Equipment
- Agriculture, Food, and Beverage
- Biotechnology
- Chemicals
- Consumer Products
- Energy/Extractive Minerals
- Heavy Capital Intensive/Raw Materials Suppliers
- High Technology/Electronics
- Highly Diversified Manufacturing and Nonmanufacturing
- Machinery and Equipment Manufacturers
- Medical/Healthcare Devices
- Paper and Forest Products
- Pharmaceuticals
- Software
- Textiles
- Other Manufacturing  
*specify:* \_\_\_\_\_

**Nonmanufacturing**

- Accounting
- Advertising
- Advocacy/Legal Services
- Broadcasting
- Commercial Banking
- Computer-Related Services
- Construction
- Consulting
- Education
- Engineering
- Entertainment/Leisure
- Environmental Conservation
- Food Service/Lodging
- Foundation/Grantmaking
- General Government
- Health Services
- Housing and Urban Development
- Insurance and Diversified Financials
- Investment Banking/Brokerage

- Investment Management
- Military
- Printing/Publishing
- Real Estate
- Retailing/Wholesaling
- Social Services
- Telecommunications
- Trading
- Transportation
- Utilities
- Other Communications

*specify:* \_\_\_\_\_

Other Nonprofit  
*specify:* \_\_\_\_\_

Other Services  
*specify:* \_\_\_\_\_

**WHAT FUNCTION BEST DESCRIBES YOUR POSITION? (check one only):**

- Accounting/Control
- Engineering
- Finance
- Fundraising
- General Management
- Human Resources
- Information Services
- Law

- Logistics
- Manufacturing/Operations
- Marketing
- Medicine
- Planning
- Product Development
- Project Management
- Public Relations

- Purchasing
- Religion
- Research & Development
- Sales
- Teaching
- Other

*specify:* \_\_\_\_\_

**ANNUAL COMPENSATION (INCLUDING BONUS) IN RMB:** \_\_\_\_\_

## WORK EXPERIENCE

Please list your positions in reverse chronological order, starting with your current one. If all positions are in the same company, please give the major promotional sequence.

NAME OF COMPANY	TITLE OR POSITION	FROM Month/Year	TO Month/Year

PLEASE ESTIMATE YOUR TOTAL YEARS OF PROFESSIONAL EXPERIENCE: \_\_\_\_\_

1. PLEASE PROVIDE A BRIEF DESCRIPTION OF YOUR ORGANIZATION AND/OR BUSINESS UNIT.

2. PLEASE DESCRIBE YOUR CURRENT RESPONSIBILITIES, INCLUDING YOUR LEVEL IN THE ORGANIZATION.

3. PLEASE EXPLAIN YOUR OBJECTIVES AND GOALS AS THEY RELATE TO ATTENDING THIS PROGRAM. ALSO DESCRIBE WHAT YOU THINK OTHER PROGRAM PARTICIPANTS MAY LEARN FROM YOU (E.G., PERSPECTIVES, SKILLS, EXPERTISE).

4. WHAT ARE THE MOST FORMIDABLE CHALLENGES FACING YOUR ORGANIZATION AND/OR BUSINESS UNIT?

## EDUCATION

DEGREE (check only highest level attained)

<input type="checkbox"/> High School	<input type="checkbox"/> BS/BA	<input type="checkbox"/> MS/MA	<input type="checkbox"/> MBA	<input type="checkbox"/> Harvard MBA	<input type="checkbox"/> TSEM MBA
<input type="checkbox"/> JD/Law	<input type="checkbox"/> PhD	<input type="checkbox"/> MD	<input type="checkbox"/> Foreign Diploma	<input type="checkbox"/> CIEBS MBA	<input type="checkbox"/> Other

UNIVERSITY: \_\_\_\_\_ YEAR: \_\_\_\_\_

Please indicate, by putting an "X" in the appropriate box, the amount of prior experience and familiarity you have with each of the following areas or activities.

	STRONG <i>Major job responsibility and/or formal academic training</i>	MODERATE <i>Working familiarity</i>	LITTLE OR NONE <i>Unfamiliar</i>
General Management:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accounting and Control:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marketing:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finance and Financial Analysis:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Human Resource Management:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Production or Operations:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information Technology:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Expertise:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>(please describe)</i>			

**HOW DID YOU LEARN ABOUT THIS PROGRAM?**

- Advertisement  Direct mail  HBS Website  TSEM Website
 CEIBS Website  Email notification  Internet search  Other (specify):

**IF YOU SAW A PRINT ADVERTISEMENT, PLEASE SPECIFY WHERE:**

- 21st Century Herald  China Business News  Harvard Business Review  Other (specify):
 Caijing Magazine  China Entrepreneur

**IF YOU SAW AN ONLINE ADVERTISEMENT, PLEASE SPECIFY WHERE:**

- 21st Century Herald  China Entrepreneur  Harvard Business Review  Other (specify):
 Bloomberg Businessweek  The Economist

**CANCELLATION POLICY**

Payment is due within 30 days of the invoice date. Cancellations or deferrals must be submitted in writing more than 30 days before the program start date to receive a full refund. Due to program demand and the volume of preprogram preparation, cancellations or deferrals received 14 to 30 days before the program start date are subject to a fee of one-half of the program fee. Requests received within 14 days of the program start date are subject to full payment of the program fee.

Upon acceptance, payment is required prior to the program start date.

SIGNATURE OF APPLICANT: DATE:

I certify that all the information and accompanying material provided in connection with this application are authentic and accurate.

**SPONSORING INFORMATION**

Harvard Business School Executive Education, Tsinghua-SEM, and CEIBS require that a senior executive within the organization sponsor the applicant. (Please note that the sponsor must be someone other than the applicant.)

**NAME OF ORGANIZATION:**

Nominates this leader for the Senior Executive Program for China program. It is understood that this executive, if admitted, will be completely free of official duties while participating in the program.

SIGNATURE OF SPONSORING EXECUTIVE: DATE:

NAME:

Last (family) First Middle Initial Prefix (Mr., Ms.) Suffix (Jr., II)

TITLE OR POSITION:

ADDRESS:

(P.O. boxes accepted outside U.S.) Street City State/Country Zip Code/Postal Code

TELEPHONE: FAX: EMAIL:

**BILLING INFORMATION**

An invoice will be emailed to the individual indicated below.

NAME:

Last (family) First Middle Initial Prefix (Mr., Ms.) Suffix (Jr., II)

TITLE OR POSITION:

COMPANY/ORGANIZATION NAME:

COMPANY/ORGANIZATION ADDRESS:

(P.O. boxes accepted outside U.S.) Street City State/Country Zip Code/Postal Code

TELEPHONE: FAX: EMAIL:

In accordance with Harvard University policy, Harvard Business School does not discriminate against any person on the basis of race, color, sex or sexual orientation, gender identity, religion, age, national or ethnic origin, political beliefs, veteran status, or disability in admission to, access to, treatment in, or employment in its programs and activities.