Graduate Program in Management Practice

Certificate Application

The Graduate Program in Management Practice Certificate consists of three components:

1. Core curriculum – 14 units
2. Specialty course option – 4 units
3. Practicum

Complete information about specific course requirements and practicum options are listed at the Technology Management Program (TMP) website (www.TMP.ucsb.edu), under *Academics*.

Currently, the Technology Management Program allows any graduate student with at least a 3.0 GPA to enroll in TMP courses; however, students accepted for the GPMP Certificate will be given preference for courses that are in high demand. By submitting a certificate application, students can improve their chances of enrolling in the classes of their choice.

It is strongly suggested that GPMP students meet with the GPMP coordinator periodically to review their progress.

Name: _____

Perm Number: _____ **Graduate Degree Major:** _____

Academic status: _____
                  (Masters, Ph.D., Ph.D. advanced to candidacy)

If you haven't advanced to Ph.D. candidacy, quarter expected to advance: _____

Advisor's Name: _____

Campus Address: _____
(if applicable)

Permanent Address: _____

                      _____

E-Mail: _____

Local/Cell Phone Number: _____

Practicum Option

Indicate the practicum option you plan to complete:

☐ **New Venture Competition**

☐ **Internship**

Do you currently have access to an internship? Please describe internship situation.
(If you have no access, write "none.")

_____

Expected date for completion of GPMP requirements: _____

How did you learn about GPMP? _____

_____

What are your anticipated career plans—what type of employment and what industry do you plan to work in when you graduate (please be as specific as possible):

_____

_____

By submitting this form, I express my intention to enroll in and complete the GPMP certificate.

_____

Signature   **Date**

Please submit to:
    Giulia Brofferio, MSO
    Graduate Program in Management Practice
    Technology Management Program
    Phelps Hall, Room 1332
    University of California
    Santa Barbara, CA 93106-5129

    Email: advising@tmp.ucsb.edu

Graduate Program in Management Practice Certificate
Requirements Checklist

Perm. No.:_____   Major:_____

Name:_____
Last   First   Middle

E-Mail:_____   Phone:_____

Course Requirements

	Units	Quarter / Year	Grade
TMP 240	4		
TMP 241	4		
TMP 244	3		
TMP 246	3		
TMP 242 or 255	4		
Total Units	**18**		

Practicum Options

1. Underline New Venture Competition

   Business Plan title:_____

   Business Plan Mentor:_____

   Completion Verification:_____

2. Internship

   Internship Name:_____

   Internship Location:_____

   Internship Mentor:_____ # Hours Worked:_____

   Completion Verification:_____

Certificate Verification   Quarter completed:_____

GPMP Staff Review:_____   Date:_____

TMP Department Chair:_____   Date:_____

Dean of Graduate Division:_____   Date:_____