

hornprogram@udel.edu www.udel.edu/horn _____ 302-831-4393



Graduate Certificate

Entrepreneurship & Technology Innovation

The graduate certificate in entrepreneurship & technology innovation serves the needs of students who may wish to launch a startup, work for an emerging technology company or foster innovation for a large enterprise. Students pursuing the certificate will learn how to recognize opportunity, generate ideas, validate innovative business models, gain buy-in from others, bring new technologies to market, and launch and grow new ventures. Due to capacity limitations, approval from the Horn Program in Entrepreneurship is needed for enrollment in the courses comprising the required immersive experience - the Startup Experience (ENTR 655 & ENTR 656). Applications will be accepted on a rolling basis; however, the application deadline for enrollment in the Startup Experience for a given academic year is October 15.

Applicant Information

First Name:	Last Name:					
Phone:	Email:		UDID:			
Education						
Current degree program:	MA (select of	MS	Ph.D	Ph.D Other:		
Graduate Program:			Expected completion date: / (MM/YY)			
Degrees/certificates earned previously: BA		BS	MA	MS	MBA	
Major/Minor/Program:			Current GPA:			

Questions for Consideration

1. What do you hope to gain by obtaining a certificate in Entrepreneurship & Technology Innovation?

2. Describe your prior entrepreneurial experiences (ex: pitch competitions, classes, workshops, startups):

3. Do you have a specific business idea that you wish to pursue? If so, please provide a brief description:

- 4. Attach a copy of your current CV/resume or provide your LinkedIn profile.
- 5. Include a letter stating that your academic advisor approves your pursuit of the certificate (funded doctoral students only).

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to acceptance into the Entrepreneurship & Technology Certificate program, I understand that the discovery of false or misleading information in my application or interview may result in my removal from the program.

Signature:_____

Date: _____

Return completed application, CV/resume and letter to:

MAIL: Venture Development Center, 196 S. College Avenue, Newark, DE 19716

Email: tmonnig@udel.edu

Thank you. You can expect to hear from us within 14 days to schedule a face-to-face interview.



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