

Application Form



**CYPRUS
INSTITUTE
of MARKETING**
**THE CYPRUS
BUSINESS SCHOOL**

No. For official use only

1. Personal Details

Full name: _____

ID number: _____

Correspondence address: _____

Postcode: _____

Telephone number:

Home: _____ Mobile: _____

E-mail: _____

Home address (if different): _____

Postcode: _____

Gender: Male Female

Date of birth (Date/Month/Year): _____

2. Course for which you are applying

Title of course _____

Study Mode:

Full-Time Part-Time

Campus:

Nicosia Limassol

Please state expected start (month and year)

3. Tuition Fees

Amount: _____

Notes: _____

DISABILITY/SPECIAL NEEDS:

(Tick as appropriate. All information supplied will be treated in absolute confidentiality)

- 0. Disabilities
- 1. For specific learning difficulties (for example, dyslexia)
- 2. Blind/partially sighted
- 3. Deaf/hard of hearing
- 4. Wheelchair user/mobility difficulties
- 5. Autistic Spectrum Disorder/Asperger Syndrome
- 6. Mental health difficulties
- 7. Unseen disability (for example, diabetes, epilepsy, heart condition)
- 8. Disability/special needs/medical condition not listed above

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Decision by Admissions Tutor

Date received: _____

Campus: _____

Year: _____

Admitted: Yes No

Exemptions given: (Please state)

Signature: _____ Date: _____

7. Personal Statement

Continue on a separate sheet if required.

Information about yourself helps us to assess your skills and suitability for the award/course. Your personal statement should amount to about 200 words.

Please use the space below to describe:

- (i) Your reasons for choosing the award/course.
- (ii) The knowledge, skills and positions of responsibility you have obtained through your work and/or education (whether paid, voluntary or domestic) which might be relevant to the award/course.
- (iii) The work experiences and/or personal developments which have been most important to you.
- (iv) The challenges facing you in your studies, work or personal career development.
- (v) Your future career plans.

8. Exemptions requested (if any) - Please attach supporting documents

9. Name & Address of Referee(s)

1. Indicate below the two persons you have asked to provide us with reference letters.
2. Please try to supply:
(i) One Academic Reference from your School, College or University
(ii) A Reference from your present/recent employer
3. The Cyprus Institute of Marketing will NOT request references from your referees. It is your responsibility to ensure that all references are forwarded to the Admissions Office at CIM.
4. To ensure that you receive a prompt decision on your application, we recommend that your completed references are attached to your completed application form.

REFEREE 1. Name:	REFEREE 2. Name:
Post held:	Post held:
Address:	Address:
Telephone No:	Telephone No:

10. Criminal Convictions

Do you have any criminal convictions? YES NO

If you have been convicted of a criminal offence, excluding motoring offences for which a fine and/or up to three penalty points were imposed, you are required to declare it here. If you tick the 'yes' box, you will be required to provide details of the conviction.

11. How did you hear about the course at The Cyprus Institute of Marketing?

12. Declaration

I confirm that the information given in this form is correct and complete.

Signature of Applicant: _____ Date: _____

CHECKLIST

Have you:

1. Completed the application form in full?
2. Attached copies of transcripts/certificates of your qualifications where applicable?
3. Attached completed references to the application form?
4. Attached copy of High School Leaving Certificate?
5. Attached copy of your ID or Passport?
6. Attached a Passport-sized photo?

Please return this completed application form with references to:

The Cyprus Institute of Marketing
25 Zannettos str., Ayios Andreas, Nicosia / 7 Stelios Kyriakides str., 3080 Limassol
P.O.Box 25288, 1308 Nicosia, Cyprus
E-mail: info@cima.ac.cy