



## THE CYPRUS INSTITUTE OF MARKETING

P.O.BOX 25288, 1308

TEL.+22778475, FAX: +22779331, NICOSIA – CYPRUS

### APPLICATION FORM FOR ADMISSION TO THE MBA PROGRAM

<b>RECENT PHOTO</b>	<b>SERIAL NO.</b>	<b>OFFICIAL USE ONLY</b>	
		Application Approved	<input type="checkbox"/>
		Application Rejected Reasons:	<input type="checkbox"/>
<b>STATE YOUR PROPOSED MBA PROGRAM</b>			

**THIS FORM SHOULD BE LEGIBLE FOR PHOTOCOPYING  
PLEASE USE BLOCK LETTERS THROUGHOUT**

**1. Full name:** (Mr/Mrs/Miss/Dr)  
(Underline surname/main name)

<b>2. Date of birth:</b>	<b>3. Marital Status.</b> No. of Children	<b>4. Nationality:</b>
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<b>5. Private address:</b>	<b>6. Business address:</b>
Telephone: Email:	Telephone                      Fax: Email:

**7. I wish correspondence to be addressed to:**

Private address                       Business address

<b>8. Name of business.</b>	<b>9. If your company is part of a parent group, state name and location:</b>
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**10. Present position:**

**11. Details of present marketing duties:**

PLEASE ENSURE PHOTOCOPIES OF YOUR CREDENTIALS AND A NON REFUNDABLE APPLICATION FEE FOR EURO 85 ARE ENCLOSED.

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**12. Career information** (prior to present post in chronological order)

	FROM	TO	NAME OF COMPANY	POST HELD
1.				
2.				
3.				
4.				

**13. Academic qualifications:**

	FROM	TO	NAME OF COLLEGE/UNIVERSITY	QUALIFICATION OBTAINED
1.				
2.				
3.				
4.				

**14. Professional qualifications**

Membership of Professional Bodies:

- 1.
  - 2.
  - 3.
- 

**15. References.** Please give the names and addresses of two persons, not relatives, who will act as your referees. The first referee should be your immediate superior and able to support your application by actual knowledge of your responsibilities. If you are head of your firm, please name two business/professional associates. **Please ask your TWO referees to send their References directly to us.**

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1<sup>st</sup> Referee: Name:.....  
Profession: .....  
Address: .....  
.....

2<sup>nd</sup> Referee: Name: .....  
Profession: .....  
Address: .....  
.....

**16. If English is not your native tongue do you feel that you have sufficient command of the English language to pursue the course satisfactorily? Applicants are required to have a good level of the English language.**

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**17. How did you hear about the MBA program?**

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**18. Outline in the space given below your reasons why you wish to pursue the MBA program.**

**I enclose a non-refundable application fee for EUROS 85 in the form of**

**Cheque**    **cash**      (please tick)

I hereby declare that all information given above is correct.

Signature of Applicant: .....      Date: .....

**PLEASE ENSURE PHOTOCOPIES OF YOUR CREDENTIALS AND NON REFUNDABLE APPLICATION FEE FOR EUROS 85 ARE ENCLOSED.**

# The Cyprus Institute of Marketing

**DO NOT TEAR OFF THIS PAGE**

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**IMPORTANT**

**PLEASE MAKE TWO PHOTOCOPIES AND GIVE ONE TO EACH OF YOUR TWO REFEREES**

**Note to Candidate:** Please enter your name below and send to your referee requesting that it be completed and forwarded DIRECTLY to: P.O. Box 25288 NICOSIA,1308 –CYPRUS, TELEFAX. 00357-22779331

M.B.A MASTER IN BUSINESS ADMINISTRATION

## REFEREE'S PERSONAL RECOMMENDATION

1. Name of Applicant.....  
(Block capitals) (Surname) (First name) (Other name)

2. How long have you known the candidate and in what connection?.....years.  
.....  
.....

3. What do you consider his/her major talents or strengths?  
.....  
.....  
.....  
.....

4. What do you consider his/her major abilities or weaknesses?  
.....  
.....  
.....  
.....

5. Does the applicant show any evidence of career, personality or emotional problems? If so, please explain:  
.....  
.....  
.....

6. Please indicate how the applicant relates to the group in which you know him/her in:

a) Intellectual ability:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Originality:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Managerial ability:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Outstanding (Top 5%)	Very good (top15%)	Good (Top third)	Average (Middle third)	Poor (Bottom third)

Name & address

Signature

Date

