

BACHELOR APPLICATION FORM

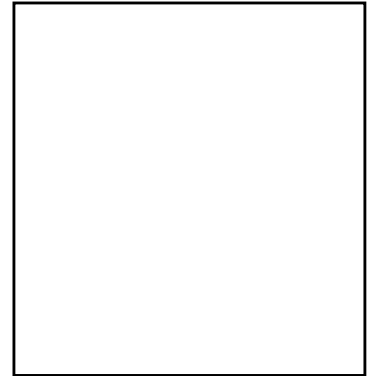
Last Name: _____ First and Middle Name: _____

Programme: _____

Today's Date: _____

Application for academic year: _____

Start Date: _____



Application process:

Step 1: APPLICATION FORM SENT ELECTRONICALLY

- A. Fill out the entire application form ELECTRONICALLY
- B. Save PDF document
- C. Attach saved PDF document file to an email and send to support@simiswiss.ch or our official representative

NOTE: Please make sure the form is submitted in PDF. Do not fill in by hand and scan. Hand written forms will NOT be accepted.

Step 2: APPLICATION FEE

Upon receiving an email from SIMI stating we have received your application, pay the CHF 200 application fee. (This fee is non-refundable)

Step 3: DOCUMENTS

- D. SCAN and EMAIL the following documents to support@simiswiss.ch
(This may be done after the initial submission of your application)

- High school Diploma and Transcripts
- Motivation Letter
- CV / Resume
- Electronic ID / Passport photo (attached within this document and as a separate file.)
- The signature page of your application signed and dated
- English Certificates

Note: Application will not be reviewed until all documents have been received electronically and the application fee has been received

Personal Information

Full Name:	_____		
	<i>Last</i>	<i>First</i>	<i>Middle Initial</i>
Place of Birth:	_____		
	<i>City</i>	<i>Country</i>	
Date of Birth:	_____		
	<i>Day</i>	<i>Month</i>	<i>Year</i>
Nationality:	_____		Gender: male female
	<i>Please list all countries of citizenship</i>		
Marital Status:	<input type="checkbox"/> married <input type="checkbox"/> single		

Address for Correspondence

<i>Street Number</i>	<i>Street Name</i>	<i>PO Box</i>
<i>City</i>	<i>State or Province</i>	<i>Zip Code Country</i>
Telephone No:	E-mail Address:	
<i>Country Code Phone number</i>		

Permanent Address (if different than above)

<i>Street Number</i>	<i>Street Name</i>	<i>PO Box</i>
<i>City</i>	<i>State or Province</i>	<i>Zip Code Country</i>
Telephone No:	E-mail Address:	
<i>Country Code Phone number</i>		

Emergency Contacts

Name of Contact # 1	Phone Number	
Relation	Email Address	
Name of Contact #2	Phone Number	
Relation	Email Address	

Does your emergency contact speak English? Yes/No
 If not which language that they speak _____

Please indicate the schools you have attended since the age of 16 (for undergraduate applicants) 18
 (Scan and email transcripts)

From mth/year	To mth/year	Name <small>School / College University</small>	Address	Degree / Diploma	Specialization (if any)

If the answer to either of the following questions is "yes", please give a detailed explanation. Use a separate sheet of paper

a) Have you ever been dismissed from, subject to any disciplinary action at, any school or college? yes no

Any scholarships, awards, prizes obtained or examinations taken (pls. indicate)

Date	Name	Institution	Address	Description

Any foreign country (ies) you have lived in for more than three months

From mth/year	To mth/year	Country (ies)

Languages

Indicate your level of oral and written language proficiency marking the appropriate figure according to the instructions given below:

1 Complete Beginner with no previous experience

5 Ability to communicate well but with frequent errors

9 Through mastery of everyday and specialist language

3 Some knowledge but insufficient for communication

7 Good communication with occasional error

10 Mother tongue

LANGUAGE	ORAL (please check box)						WRITTEN (please check box)					
	1	3	5	7	9	10	1	3	5	7	9	10
English												
French												
Italian												
Spanish												
Chinese												
Japanese												
Other:												
Other:												

Please explain how you intend to finance your studies _____

Please give the name and the address of person or body responsible for payment of your fees: _____

Last Name / Name	First Company	Address (Street, Street No.)	P.O. Box	ZIP Code	City	Country

What are your expectations related to the studies you wish to complete at the Swiss Institute of Management and Innovation? (pls. mark/indicate)

- General knowledge in management Update to the latest know-how and perceptions in management from over the world Improved strategic knowledge
- Important professional contacts/relations with other participants/ students Possibilities to work scientifically
- Contacts/relations to highly qualified professors Practice related study cases
- Development of personality and attitudes as a manager or entrepreneur Development of human qualities
- Experience and knowledge in new learning and teaching technologies
- other expectations: ____

Declaration:

I am applying for admission to the above Academic program at the Swiss Institute of Management and Innovation. I attest that all information given in this application is true to the best of my knowledge. I understand that the decision to offer me a place in the program rests with the Swiss Institute of Management and Innovation whose decision is irrevocable. If I am offered and accept a place in the program, I undertake to abide by the rules and regulations of the Swiss Institute of Management and Innovation and to ensure payment of all fees. I confirm that to the best of my knowledge the information given in this application form and in the attachments is complete and accurate. I do also agree, that once I do obtain my entry visa, my tuition fee is due to SIMI and no payback will be made if I withdraw from the course, program or school.

(Please sign and date this form, scan it and return with your application form)

Signature : _____

Name in capital letters : _____

Place / Date:

For SIMI Admissions office use only:

No.:

Apartment:

Verified by
Center Representative

Approved by
Academic Director