**ADMISSION FORM**

**1. PERSONAL INFORMATION ON THE CANDIDATE**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(First Name, Maiden name (if married), Family Name)

Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: Male Female

(Dd/mm/yyyy)

ID Card/Passport Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Citizenship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country of residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street Number, Street Name, Building, apartment Number, City, Postal Code)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-Mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Highest degree: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Degree Title, Year and Name of Institution)

Current Employer & Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Years of Experience: Managerial Positions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Positions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. PLEASE SELECT YOUR SOURCE OF INFORMATION ABOUT THIS PROGRAM (multiple choice):**

BBS Website UEV Website EUBA Website Newspapers

Social Media Alumni of BBS Other websites Brochures

TV/Radio Presentations Fiends/Relatives Forums

**3. FINANCIAL AID: HOW DO YOU INTEND TO FINANCE YOUR EXECUTIVE CERTIFICATE ?**

Company scholarship Personal sources Study loan Private scholarship

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Remarks:**

**Declaration**

* I hereby declare that the information as provided by me in this form and attached documents is true and correct. If at any stage of the program the details as provided are found to be incorrect, I would have no objection being expelled without any refunds or compensations.
* I have fully understood the program, its contents and the affiliations.
* I shall not indulge in any activities which will be detrimental to the institution.
* I shall abide by the rules framed by the management of the institution during the program.
* Program and admission fees are not refundable.
* I hereby declare that my information can be used in all activities related with the Executive Certificate.

**Documents attached:**

1. Copy of the Bachelor’s Degree + English translation of the Bachelor Degree (if not granted by a Romanian university).
2. Copy of the transcript of the Bachelor Diploma + English translation of the Transcript (if not granted by a Romanian university).
3. Copy of the birth certificate + English translation of the certificate (if not granted by a Romania).
4. Copy of the marriage certificate (if applicable) + English translation of the certificate (if not granted by a Romania).
5. Copy of the identity document
6. CV
7. Letter of motivation
8. Medical certificate stating that you are clinically healthy
9. Registration fee, proof of payment 200 RON (40 Euro)

|  |  |  |
| --- | --- | --- |
| Date of submission  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (dd/mm/yyyy) |  | Signature of the candidate  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |