



APPLICATION FOR OVERSEAS CORRESPONDENCE STUDENTS

Proposed Course of Study. Please circle:

(1)POSTPLAN	(5)ADIS	(9)ADSA	(13)ADFC	(17) ADES	(21) ADHURMAN
(2)DMM	(6)BIS	(10)BSA	(14)BFCM	(18) BES	(22) BAHURMAN
(3)ADBA	(7)ADTOUR	(11)DSM	(15)ADBANK	(19) ADAMS	(23) ADPSY
(4)BBA	(8)BTM	(12)BED	(16)BBM	(20) BAMS	(24) BAPSY
(25)ADFDB	(26)BFDB	(27) BBL	(28)BLG		

Codes: (1) Postgraduate Diploma in Corp, Mgt & Strategic Planning, (2) Diploma in Mkt Management, (3) Advanced Dip. In Business Administration, (4) Bachelor in Business Administration, (5) Advanced Diploma in Insurance Studies, (6) Bachelor in Insurance Studies, (7) Advanced Dip. In Tourism, (8) Bachelor in Tourism Mgt. (9) Advanced Diploma in Shipping Administration, (10) Bachelor in Shipping Administration, (11) Diploma in Sales Mgt. (12) Business English Diploma, (13) Advanced Diploma in Financial & Computer Studies, (14) Bachelor in Financial & Computer Mgt, (15) Advanced Dip. In Banking (16) Bachelor in Banking Management, (17) Advanced Diploma in European Studies, (18) Bachelor in European Studies, (19) Advanced Diploma in Marketing Science, (20) Bachelor in Marketing Science, (21) Advanced Dipl. HRM, (22) Bachelor in HRM, (23) Advanced Diploma in Psychology, (24) Bachelor in Psychology. (25) Advanced Diploma in Fashion Design & Business, (26) Bachelor in Fashion Design & Business, (27) Bachelor in Business Law (28) Bachelor in Logistics

IMPORTANT NOTE TO STUDENTS:
MAKE SURE YOU ATTACH ALL YOUR EXPERIENCE AND ACADEMIC CREDENTIALS AND A RECENT PHOTO. AN APPLICATION FEE FOR EURO 40 MUST ACCOMPANY YOUR APPLICATION FORM, WITHOUT WHICH NO APPLICATION CAN BE PROCESSED

APPLICATION FEE EURO €50 – Academic year Annual Fees.....

Surname: Mr/Mrs/Miss.....

Other Names:

Address for all correspondence.....

.....Home Tel.:Mob.....

Date of Birth: Marital Status: Single Married Divorced

Have you been a student of C.I.M before? If yes give Reg. No.....

Education (Graduate of School or College of University).

(a)..... (b).....

Qualifications obtained – Academic / Professional

(a)..... (b).....

Language spoken

(a)..... (b)..... (c).....

Employer's name and address.....

..... Business Telephone no.....

Nature of Business..... Fax. No.

..... E- Mail:

Post held at present.....

Source of Financial Assistance:

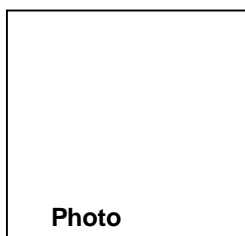
I hereby declare that the above information is correct.

Date: Signed:.....

For official use only

Application approved or turned down.....

Remarks.....



Signed:

ADMISSIONS SECRETARY