# APPLICATION FOR ADMISSION



Year

Indicate below the programme of Study for which you are applying:

English Language Foundation Program (1 Year)

Master in Business Administration (1 or 1,5 Year)

Bachelor of Science in Business Administration (4 Years)

## Please read the instructions on the back of this form and complete all sections. Surname First Name Middle Name Passport No./I.D Place of Issue: Date of Issue: Date of Expiry: Day Day Month Year Month Year A. ADMISSION INFORMATION Semester for which you are applying: Fall Spring

Year

B. CONTACT DETAILS							
Permanent Home Address:							
Country		City	Postal Code				
Mail Address: (if different from the above)							
Country		City		Postal Code			
Telephone:	Cell Phone:		Fa	Fax:			
E-mail							
C. ADDITIONAL INFORMATIO	N.						
O. ADDITIONAL INI ORMATIO	N						
Sex: Female Male		Date of	Birth:	Day Month Year			
		Date of Religion:	Birth:	Day Month Year			
Sex: Female Male	Single			Day Month Year  Widowed			
Sex: Female Male Male	Single	Religion: Divor	ced				
Sex: Female Male  Nationality:  Marital Status: Married	Single mber: Are	Religion:  Divor  you a refugee (applied  ation that the college	cedes only to (	Widowed			
Sex: Female Male  Nationality:  Marital Status: Married  If you have children, state the num  STUDENTS WITH SPECIAL NEEDS: Only relevant College officials or/a	Single mber: Are	Religion:  Divor  you a refugee (applied  ation that the college	cedes only to (	Widowed			
Sex: Female Male  Nationality:  Marital Status: Married  If you have children, state the num  STUDENTS WITH SPECIAL NEEDS: Only relevant College officials or/a	Single mber: Are	Religion:  Divor  you a refugee (applied  ation that the college	cedes only to (	Widowed			
Sex: Female Male  Nationality:  Marital Status: Married  If you have children, state the num  STUDENTS WITH SPECIAL NEEDS: Only relevant College officials or/a	Single mber: Are	Religion:  Divor  you a refugee (applied  ation that the college	cedes only to (	Widowed			

D. EDUCATIONAL BACKG	เดร	JND											
PREVIOUS EDUCATION													
List in chronological order all Schools (Secondary, College or University) you have attended. Supporting documents of the educational qualifications listed below must accompany this application.													
Name of School/University	City/Country		Period From To		Title Awarded			verage Grade	Language of Instruction				
ENGLISH LANGUAGE/OTHER EXTERNAL EXAMINATIONS													
List in chronological order of any English or other External Examinations you have taken. Supporting documents of the examinations listed below must accompany this application.													
Type of Exam (i.e. TOEFEL, GCE, ELTS, LCCI etc.	:.)	Score/Grade	Date Day Month		Year	Board or Examining Board							
E. APPLICANT'S DECLARA	TIC	ON											
I hereby declare that the above information is true and that I have not misrepresented or inaccurately represent any element or certificate submitted with this application. I also agree that with my registration at the CBS college of Business Studies Cyprus, I undertake to abide by the rules of study and regulations of operation of the College.													
Further on, I hereby declare the Individuals), [138 (1) / 2001 acception and unreserved and /cin electronic or any other form law, and which files concerning I also irrevocably consent such	ct] a or m of g me	as well as the E y irrevocable co one or more file e and have been	U General onsent and es of person declared	I Data P Id author Sonal dat d or will	rotectio ize the a within be decla	n Regulati College of the mean red.	on (G Busi ing a	SDPR) an ness Stu	id provide an dies, to keep				
Applicant's Signature:					D	ate: Da	ay	Month	Year				

#### **ADMISSION INSTRUCTIONS**

### **Application Submission**

This application should be completed and delivered to:

College of Business Studies Cyprus Admissions' Office

3 Kostaki Pantelidi str., 2057 Nicosia, Cyprus

P.O.Box 25331, 1308 Nicosia, Cyprus

Fax: +357 22664910

Email: admissions@cbscy.ac.cy

#### **Application Requirements**

For the examination of this application is required to fill in all the details, accompanied by all required documents (transcripts, certificates, etc.)

- a. A photocopy of your passport or ID, which clearly displays your name, date of birth, passport number, passport issue date and expiry date. Your passport must be valid for at least two (2) years from the date of your application.
- b. A copy of your secondary and higher secondary school certificates (Apolyterion) and a copy of your grades. Your transcript must indicate a 75% average overall grade or higher. If these documents are neither in English nor in Greek, they will need to be translated and attested.
- c. If you are applying for the postgraduate program (MBA), in addition to the documents listed above (see point b), you must also provide a copy of the degree(s) you hold together with the relevant transcripts.
- d. A copy of your evidence of knowledge for English Language.
- e. A personal statement of interest for the relevant program.
- f. A non-refundable Application fee of €60.

#### **Deadlines of Submission**

Applications should be returned to the Admission's Office as follows:

Fall Semester: Beginning of August

· Spring Semester: Beginning of December

#### Other Information

Detailed information relevant to the application procedure, the minimum English language requirements etc., is provided on the website (www.cbscy.ac.cy).

#### **Direct Contact**

For any further inquiries contact us:

Tel.: +357 22459090, Fax: +357 22664910

Email: info@cbscy.ac.cy, admissions@cbscy.ac.cy

#### **CBS - College of Business Studies Cyprus**

Main Offices: 3 Kostaki Pantelidi str., 1st floor, 2057 Nicosia, Cyprus P.O.Box 25331, 1308 Nicosia

Tel.: +357 22459090, Fax: +357 22664910, Email: info@cbscy.ac.cy, website: www.cbscy.ac.cy