



STUDENT APPLICATION FORM

ACADEMIC YEAR 2011/2012

DEADLINES for submission:

- ✓ 15th May for summer intake
- ✓ 15th December for winter intake

(Photograph)
compulsory

This application should be completed in black, CAPITAL LETTERS in order to be easily copied, faxed or e-mailed

Please, specify the field of study at BASW (tick ✓)			
▪	AP Degree in Marketing Management Summer intake	<input type="checkbox"/> Esbjerg	<input type="checkbox"/> Sønderborg
▪	AP Degree in Marketing Management Winter intake	<input type="checkbox"/> Esbjerg	<input type="checkbox"/> Sønderborg
▪	AP Degree in Multimedia Design and Communication	<input type="checkbox"/> Esbjerg	
▪	AP Degree in Computer Science	<input type="checkbox"/> Esbjerg	<input type="checkbox"/> Sønderborg
▪	AP Degree in Fashion Design	<input type="checkbox"/> Sønderborg	
▪	AP Degree in Management Technology Offshore	<input type="checkbox"/> Esbjerg	
Please, specify the field of study – Bachelor programs (tick ✓)			
▪	Bachelor in International Marketing and Sales	<input type="checkbox"/> Esbjerg	
▪	Bachelor in Design and Business	<input type="checkbox"/> Sønderborg	
▪	Bachelor in Web Development	<input type="checkbox"/> Esbjerg	
▪	Bachelor in Software Development	<input type="checkbox"/> Esbjerg	
▪	Bachelor in Technical Manager – Offshore	<input type="checkbox"/> Esbjerg	

(to be completed by the student applying)

STUDENT'S PERSONAL DATA	
Family Name	
First Name (s)	
Sex (tick ✓)	<ul style="list-style-type: none"> ▪ Female ▪ Male
Date of Birth (dd/mm/yy)	
Place of Birth	
Nationality	
Permanent address	Street and No.
Address for correspondence (if different from above)	Postal Code and City
	Country
	Street and No.
Telephone No./Fax No.	Postal Code and City
	Country
E-mail (regularly checked!)	



ACADEMIC DETAILS	
Graduating school	Name
	Address
	Telephone/fax
	e-mail
Field of study	
Diplomas/degrees obtained	
Have you studied abroad before?	
<ul style="list-style-type: none"> ▪ Yes ▪ No 	
If <u>yes</u> , when? at which institution?	

LANGUAGE COMPETENCE							
Mother Tongue							
Other languages (specify and tick✓)	I am currently studying this language		I have sufficient knowledge to follow lectures		I would have sufficient knowledge to follow lectures if I had some extra preparation		certificates awarded (if any)
	yes	No	yes	no	yes	no	
English	▪	▪	▪	▪	▪	▪	
	▪	▪	▪	▪	▪	▪	
	▪	▪	▪	▪	▪	▪	

WORK EXPERIENCE (if relevant)			
Type of work experience	Company/organisation	Dates	Country

Briefly state the reasons why you wish to study abroad ?

Student's signature	
Place	
Date	

Application form should be sent to:

Esbjerg Applications:

Liselotte Kaus



International office manager

Sp. Kirkevej 103

6700 Esbjerg

Denmark

Ph.: +45 76133200

Fax: +45 76133201

e-mail: lka@easv.dk

Sønderborg applications:

Ulla Abbas



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