

## Please use one Application only

Email address (Registrar)

admin@buniv.org

ADMITTED	Yes		No					
ACADEMIC YEAR BEGINNING ON	<del> </del>			/ / /			1 RECENT COLORED PHOTOGRAPH	IS
						-		
FOR BU USE ONLY				REG	ISTRAR			
Please make sure to fill the form completely PERSONAL DETAILS	, Type	your in	<u>iformati</u>	on and em	ail it to	the regist	<u>rar</u>	
Name								
Father's Name			Mo	other's Nan	ne			-
Home( Permanent)Address		-	Ad	dress for				-
			Fu	ture				_
			Co	orresponde	nce			
			(if	different)				_
Telephone No			Te	lephone No	o			_
Fax: No. :			Email	Address:_				
Date of Birth(Mo/Day/Yr))		Marrie	d	Single	Male			
Nationality	1	Native I	Languag	e				
Present Occupation/Position								
PROPOSED FACULTY/SCHOOL AT BU	T							
OR ITS AFFILIATED COLLEGE (name, if		able)						
Qualification Aimed for PhD DBA	аррпса П		LD 🗆	MA/PhD			МВА □	
MS 🗆	BS		D□			BBA		
Other Certificate	]	Но	onorary d	octorate PhD		IC	P Fellowshi <b>₁</b>	
					1/	TD MD A F	iploma 🔲	
Subjects/ Specialisation:					10	CP MBA D	трюша 🗀	
(Proposed starting date) September □ Jan	uary	П	Мау 🛭	] July	□ Y	ear		
(Full-time) □		(	)	•			nce ducation)	
If part-time, what proportion of your time do	you h	ave to s		the course	each we		_	
			_					
Financial Arrangements: How do you ex	xpect t	o be fin	anced o	luring you	ır studie	es?		

## - Page 2 - APPLICATION FOR ADMISSION-

Please note: All applicants **must** provide proof of their qualifications

Overseas applicants must enclose a transcript of their academic record, giving their marks or grades in each year of their course, program of study.

S. No.	Qualification with Grades	Subjects	College/University (City, Country)	from	to	Date Awarded
				_		
nglish Il candid lease gi	ve below your Engli	anguage is not English mu ish language qualification of titles, and full address of	st satisfy BU English language requirement. or evidence of your proficiency in English.  of two referees who can inform the college of	your acade	emic a	bility, your
haracte	er and your capacit	ty for advanced study.				
			2.			
ADDIT	TIONAL RELEVA	ANT INFORMATION	(please give any information you feel is relevant	to your cou	ırse stu	udy)
Where	e did you come to	know about BU				

This document is a form of application only. The University reserves the right to refuse admission to any candidate. False or misleading information given on this form or academic credentials will result in rejection of the application or

Consequence expulsion without refund of fees.

Signature of Applicant:	Date://

## Student Declaration

I understand that the University is a bona-fide autonomous accredited institution registered in the commonwealth of Dominica as per Dominica SRO No. 65 of 1996.

I also understand the BU curriculum is accredited by the institute of management specialist UK for Memberships grades and students are required to register for the full membership award from the professional body after the completion of Ballsbridge University programmes.

The BU programmes is also accredited on the Ballsbridge Qualification Framework (BQF) regulated by the Board of Quality Standards (BQS).

BU qualification are also validated by partner state accredited universities for a second degree award subject to a Validation fees paid by the student or incorporated in the tuition during admission. I understand that the aims of the BU is to provide affordable accredited learning and qualifications to students from low income countries and those less privileged in the developed countries.

I understand that BU reserves the right to modify its fees, to add or withdraw members from its faculty or administration, and to arrange its courses, programmes, and facilities as teaching and economic requirements render it desirable.

I understand that BU is internationally accredited by IAO and recognized by some Caribbean Ministries of education and apostille Authentications can also be done for students by IAO and CUFCE. I understand that all information send to BU will be stored in the data base of the university and will be used for all academic purpose of the University.

I have read the Terms and Conditions of the University and I freely make this agreement without reservation to study in the academic institution.

Ciamad	h
Signed	υν

Student Name