

APPLICATION FORM - Master of International Business (MIB)

Please fill in electronically, then print and sign the form.

1. Concentration:

- ☐ Entrepreneurial Leadership
- ☐ Finance
- ☐ Sustainability

2. Entry date

Year: (YYYY)

Please indicate the semester to which you wish to apply:

- ☐ Fall - Winter Semester (September)
- ☐ Spring - Summer Semester (February)

Passport photo
(4 identical recent photographs)

3. Personal information and contact details

☐ Mr. ☐ Mrs. ☐ Ms.:
First name Middle name Family name

Date and place of birth:

Mailing address:

Postal code, city & country:

Telephone: Email:

Mobile telephone: Passport number:

Nationality:

Swiss permit: *If you travel on a foreign passport, but have a Swiss permit or visa please attach a copy of the document, even if it has expired.*

4. Education (List the highest degree or qualification obtained)

Degree or qualification	Year obtained	By which institution and location
.....
.....

5. Work experience (if any)

Company name	Industry sector	Position	Dates (MM/YY to – MM/YY)
.....
.....
.....

6. English Level

☐ Mother tongue

☐ Excellent

☐ Good

☐ Fair

Please indicate the score obtained in the following English test:

☐ TOEFL/score:

☐ IELTS/score:

☐ BULATS/score:

☐ TOEIC/score:

☐ Other: please specify type and score:

7. Name and address for invoices

☐ Tick if same as contact details

Please indicate in whose name the invoice for the program fees should be addressed.

Name of company:

☐ Mr. ☐ Mrs. ☐ Ms.:

First name

Middle name

Family name

Mailing address:

Postal code, city & country:

Telephone: Email:

Mobile telephone:

8. How did you hear about BSL? (Please indicate the source)

Agent:

From a BSL current student:

From a BSL former student:

BSL faculty:

Career advisor/Employer:

Event/Conference:

Fair:

Friend/Family/Colleague:

Internet:

Other institutions/organizations:

Press article:

Print advertising:

School rankings:

Social media:

I am a current/ former BSL student:

Other:

Business School Lausanne reserves the right to change or modify in part or completely any course description and/or program in the interests of all parties concerned. The place of legal venue for any dispute shall be Lausanne, Vaud, Switzerland.

I,, hereby certify that I have read and understood the "Registration Terms and Conditions" and sign in acceptance of these conditions. I fully adhere to the rules and regulations of the school. I also confirm that the information entered by myself on the application form is correct.

First name:

Family name:

Date:

Signature of applicant:

Please return your complete application file to:

Business School Lausanne
Office of Graduate Admissions
Rte de la Maladière 21
1022 Chavannes
Switzerland