

Modular MBA & Executive MBA Application Form

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

Please submit a digital passport style portrait photograph with your file

1. Please indicate the program option you would like to apply to:

- Full-time MBA
- Part-time MBA
- Full-time Executive MBA
- Part-time Executive MBA

2. Please indicate the concentration you would like to apply to:

- Specialization: Business Transformation & Entrepreneurship - Focus: Sustainable Business
- Specialization: Business Transformation & Entrepreneurship - Focus: Data Science for Executives
- Specialization: Sustainable Business - Focus: Data Science for Executives
- Specialization: Sustainable Business - Focus: Business Transformation & Entrepreneurship
- Specialization: Data Science for Executives - Focus: Sustainable Business
- Specialization: Data Science for Executives - Focus: Business Transformation & Entrepreneurship

3. Entry date - Please indicate the semester to which you wish to enroll:

- Fall - Winter Semester (September)
 - Spring - Summer Semester (February)
- Year: _____

4. Personal information and contact details

First Name: _____ Middle Name: _____ Family Name: _____

Male Female Mr./Mrs./Ms.: _____ Email: _____

Date and Place of Birth: _____

Mailing Address: _____ Post Code _____

City & Country: _____

Telephone: _____ Passport Number: _____

Mobile Number: _____ Nationality: _____

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

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

Degree or qualification	obtained(year)	by (Institution and location)
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. English Level

Mother tongue Excellent Good Fair

If applicable, please indicate the score obtained in the following English test

TOEFL /score: _____ TOEIC/score: _____ IELTS/score: _____

7. Work experience (At least 3 years of relevant working experience. Please mention your most recent positions starting with the current one)

Company Name	Industry Sector	Position	Dates (MM/YY to –MM/YY)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. Name and address for Invoices Tick if same as contact details

Please indicate to whose name the invoice for the program fees should be addressed:

Name of Company: _____
Family Name Dr./Mr./Mrs./Ms.: _____ First Name: _____
Mailing address: _____ Post Code: _____
City: _____ Country: _____
Main Telephone: _____ Email: _____

9. How did you hear about the Program? (Please indicate the source)

Fair: _____ Internet: _____
School rankings: _____ Social media: _____
Press article: _____ Print advertising: _____
Friend/Family/Colleague: _____ BSL faculty: _____
Agent: _____ High school (counselor/event): _____
Other institutions/organizations: _____
Career advisor/Employer: _____
Event/Conference: _____
From a BSL former/current student: _____

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 the application form to your admission advisor or directly to admissions@bsl-lausanne.ch.