

# University of Northwest Europe



Admission Office  
Heyendallaan 58  
6464 EP Kerkrade  
Netherlands

Tel. +31-(0)45-711 3339  
Fax +31-(0)45-711 3340  
Info@unorthwest.eu

## APPLICATION

Name \_\_\_\_\_ First \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Age \_\_\_\_\_ Date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex \_\_\_\_\_

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Business Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Mobile ( \_\_\_\_\_ ) \_\_\_\_\_ Skype \_\_\_\_\_

Best time to contact \_\_\_\_\_ a.m. \_\_\_\_\_ p.m.

Fax ( \_\_\_\_\_ ) \_\_\_\_\_

Email \_\_\_\_\_

URL \_\_\_\_\_

Present occupation \_\_\_\_\_

Employer \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I wish to apply for the following programme:

Professional ( ) Cert ( ) Dip ( ) Bachelor ( ) Master ( ) pre-doctoral ( ) Doctorate ( ) other ( )

Residential programme ( ) Distance learning ( ) Independent Study ( ) by research ( )

in the following area of study:

Faculty \_\_\_\_\_ Institute \_\_\_\_\_

Description of programme \_\_\_\_\_

Beginning Fall 2013 ( ) Spring 2014 ( ) other \_\_\_\_\_

## Formal Education

Information must be complete with exact dates given on each entry.

Please attach *copies* (**originals not required for evaluation**) of transcripts, licenses, or certificates.

**(Secondary Education)** Please indicate the name of the High School and year graduated, or date of Baccalaureate or equivalent.

Name \_\_\_\_\_ City/State \_\_\_\_\_ Year \_\_\_\_\_

**[College University]** Please list the degree(s) earned, i.e., Bachelors, name of the school, degree major

College/University name	Degree	Year(s) of attendance	Hours earned	Graduation date
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if more space is needed, lease add additional sheet(s)

## Professional/Technical Certificates or Licenses.

Name of Organisation	Area of Study	Year Attended	Certificate/License
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**U.N.W. provides equal education opportunity to all qualified students without regard to race, creed, national origin, sex, or disability.**

## EMPLOYMENT HISTORY

Start with first job and progress in order to present. Describe duties, responsibilities, number of employees you have supervised, in-depth detail of knowledge and experience gained and skills you have shown in the performance of your occupation.

Name of employer	occupation	years employed
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**If necessary, add additional sheets**

**Professional Associations:** Please list any trade organizations or professional associations to which you belong, such as your local Chamber, Rotary, or CAFC, and any positions held within these organizations that you feel have contributed to your professional growth.

Name of organisation \_\_\_\_\_ years as a member \_\_\_\_\_ position held \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LANGUAGES:** PLEASE IDENTIFY AND INDICATE YOUR LANGUAGE PROFICIENCY ON THE LINE BELOW.

1. Elementary speaking ( )
2. Limited word proficiency ( )
3. Good command ( )
4. Professional use ( )

English Proficiency \_\_\_\_\_ Other languages \_\_\_\_\_

Describe level (see above 1 – 4) \_\_\_\_\_

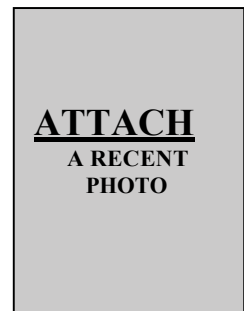
**Do you hold language certificates or diplomas ?**

**Passport Data:**

Country \_\_\_\_\_

Name as listed \_\_\_\_\_

Passport was issued at \_\_\_\_\_ Passport Number \_\_\_\_\_



**DOCUMENTS: ARE ATTACHED ( ) WILL BE POSTED UNDER SEPARATE COVER ( )**

- High School Diploma ( ) University degree (s) ( )  
Baccalaureate ( ) State Examination (s) ( )  
Other ( ) Other ( )  
Passport/ID card copy ( ) CV ( )

I certify to the best of my knowledge the information provided in this application is accurate and complete. I understand that if this information or any other information upon which my admission is based is found to be inaccurate or incomplete, the university may rescind my degree. If admitted, I agree to abide by the rules and regulations of the university including, but not limited to, those contained in the current student catalogue. I acknowledge that all official transcripts which I submit become the property of the University and will not be forwarded to another institution or returned.

\_\_\_\_\_/\_\_\_\_\_  
**Applicant's Signature** **Date**

(don't write in this field - for official use only)

Date Application received: \_\_\_\_\_ File number: \_\_\_\_\_ processed: \_\_\_\_\_ Administrator: \_\_\_\_\_