

Master's **Programs**

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Percens	informat	ion

Surname		First name			Gender	M F
Date of birth (DD/MM/YY)		City & coun	try of birth			
Nationality		Passport n	0.		Marital status	
failing address						
Street, number						
City		Country			Postal code	
Phone		Mobile				
Skype		Email				
Permanent home addre	es (if different from ab	ove)	I			
Street, number	(if different from ab-	ove)				
City		Country			Postal code	
Phone		Mobile			r sotal sods	
Skype		Email				
· / r · -		2				
hich program are you	applying for?	Academic	year			
Master in Management		Term begin	ning:			
Master in Marketing		□ o-+-!	□ I	□ N4 - ·· - I-		
Master in Innovation & En	trepreneurship	☐ October	☐ January	☐ March		
Master in Fashion & Luxu	ry Business	Language	s (indicate your co	mpetency if a	applicable)	
Master in Digital Marketing	g, Transformation & Design 1			. ,	,	
Master in Business Analyt	ics & Data Science		Native	Fluent	Intermediate	Basic
		English				
		French				
		German				
		Italian				
		Spanish				
		Other (spec	ify)			
ducation						
ndergraduate/Bachelor's	studies					
Jniversity			Degree obtained			
City			Major			
Country			Grade point average	•		
Contact person			Dates attended			
raduate/Master's/MBA s	tudies (completed or in pr	rogress)				
			Degree obtained			
University			Major			
-			Crada paint average	,		
City			Grade point average			
City			Dates attended			
Country Contact person	se indicate the date(s) and	d the score(s) of the test	Dates attended			
City Country Contact person roof of English level (plea		d the score(s) of the test TE Academic	Dates attended	GRE		
University City Country Contact person roof of English level (plea TOEFL IELTS	b.		Dates attended			



Master's Programs

Current employment (if applicable)		
Current employer	Field of activity	
Initial position	Start date	
Current position	Department	
Full-time/Part-time		
List your responsibilities		
Work experience		
☐ 1-3 years		
□ 3-5 years		
☐ 5-10 years		
☐ 10-15 years		
☐ More than 15 years		
What are your career and long-term objectives? (max. 50	O words)	
How did you first learn about EU's programs? (specify on	e)	
Fair or exhibition. Which one?		
☐ Educational guide. Which one? In the press. Which publication?		
Recommendation from a former student. Name:		
☐ Internet. Which website/search engine?		
☐ Social network. Which one?		
$\hfill \square$ Admissions Office. Please specify the campus:		
Educational agency. Which one?		
Other. Please specify:		
Documents to be submitted		
1. Completed application form	6. 1 written or video essay	
2. 1 certified copy of bachelor's degree and transcripts3. Proof of English level or test score (for non-native speakers)	7. An electronic passport photo or 3 printed passport- 8. 1 copy of valid passport or ID card	size photos
4. 1 copy of CV/résumé	Bank certificate or letter certifying the applicant's fit	nancial solvency
5. 2 letters of recommendation	10. €200 non-refundable application fee (check, money ord	
Written/video essay		
Write an essay or record a two-to-three minute video essay* and inc	clude it in your application package. This will help the EU	Admissions Committee become
acquainted with you, see how motivated you are to join us and dete		ld be on one of the following topics:
 Tell us about the most challenging team experience you have ha Please describe a personal failure that has impacted your life and 		
3. What achievement are you most proud of (studies, sports, profe	,	
4. If you could imagine an entirely different life from the one you le	ead, how would you want it to be?	
5. Each of us has been influenced by people, events and situations *Visit the Admissions section on www.euruni.edu for instructions on how to submit vi	• • • • • • • • • • • • • • • • • • • •	are today?
	400 000470.	
Certification		
I understand and accept the terms that govern the admissions pro have provided in the application is complete and accurate and tha	, , , ,	'
aware that I will not be reimbursed for tuition fees already paid. My factually correct and honestly presented.	, , , , , , , , , , , , , , , , , , , ,	
Signature:		Date: / /
		DD MM YY
Data privacy		
CONTROLLER: European College - EC Business School, S.A. (henceforth, entity, PURPOSE: Collection and treatment of personal data to manage t information by all means developed by EU Business School Group (camp or consent of the interested party, RECIPIENT: other entities of the EU Bu	he activities (marketing, sales, academics, admissions, genera ouses of Barcelona, Geneva, Montreux and Munich). LEGITIMA	l administration) and the dispatch of CY: Agreement with the interested party and

opposition at privacy@euruni.edu at any time attaching a copy of your ID card, passport or equivalent. In the event of any disagreement, you may file a complaint with the relevant Data Protection Authority. ADDITIONAL INFORMATION: http://www.euruni.edu/en/Disclaimer/Privacy-policy.html.

☐ I give my consent to receiving information and news about EU Business School Group's programs and activities.