



INTERNATIONAL
HELLENIC
UNIVERSITY

To process your application, please send this form completed in full to:

International Hellenic University
Admissions Office
14th Klm. Thessaloniki – N. Moudania
57001 Thermi
Greece

Please attach
a passport
size
photograph
here

EXECUTIVE MBA PROGRAMME APPLICATION FORM

PERSONAL INFORMATION

Surname:	
First name(s):	
Preferred First name:	
Title:	M/F:
Nationality:	
Country of permanent residence:	
Date of birth (dd/mm/yyyy):	Country of birth:

Street:
Town:
Postal code:
Country:

Contact phone	Mobile phone
Fax number	e-mail address

EDUCATIONAL BACKGROUND

Please list all universities, colleges, graduate schools, professional schools, which you have attended or are now attending, starting with the most recent.

Institution and Country	Degree	Subject Area	Start Date	End Date	Grade

EMPLOYMENT HISTORY

Starting from the most recent position, please list all the full-time positions you held since graduation.

Organisation / Country	Dates	Job title	Major responsibilities

PROFESSIONAL QUALIFICATIONS

Title of Qualification: _____

Institution: _____

Date of award: _____

TOEFL/CPE/IELTS

Test type: _____ Score: _____ Date: _____

OTHER LANGUAGES

GMAT

Date test taken/to be taken	_____
Total score:	_____
Verbal %	_____
Quantitative %	_____

How do you feel you would benefit from attending the IHU Executive MBA and what you think your contribution to the course will be? (please use a separate sheet if necessary)

REFERENCES

Please list below two persons who will send letters of recommendation

Name, Title, Address, Tel., email	Name, Title, Address, Tel., email

FUNDING ARRANGEMENTS

Please give details of how you plan to fund your studies at IHU.

Personal means

Company sponsorship

Scholarship

If Scholarship, please state the institution that provides it:

DECLARATION

I hereby certify that the above information and data are correct and complete. I declare hereby that in case of my admission in IHU to conform with the legal framework and the regulations of the IHU.

I accept that the above data maybe processed by the IHU according to the Greek Data Protection Law. I consent to the storage of these information and all data in manual and digital files.

Signature _____ Date _____