

APPLICATION FORM

Family (Last) Name	Given (First) Name	Adopted Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth (dd/mm/yyyy)	Nationality	Place of Birth
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status	
<input type="text"/>	<input type="text"/>	
Mailing Address	Phone	E-Mail
<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	Post Code	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>
Swiss Embassy/Consulate of visa application		
<input type="text"/>		

Program applied for and preferable starting date

- 1st yr Diploma (HD) 2nd yr Higher Diploma (HD2) 3rd yr Bachelor Degree (BA) *
- 2 yr MBA Degree (MBA) 1 yr Post Graduate Diploma (PGD)
- 1st yr Culinary Diploma (CLN) 2nd yr Advanced Culinary Diploma (CLN2)

Starting Date: Year:

- January February April May July August October November

* Please note that BA courses start in February and August of each year only

Room Preference: Single Room **Food Preference:** Vegetarian

Surcharge of CHF 2500 -- for 25 weeks

The latest education certificate earned

Name of Organisation	Location
<input type="text"/>	<input type="text"/>
Graduation Date (dd/mm/yyyy)	Special Awards
<input type="text"/>	<input type="text"/>

Language Knowledge

	Spoken	Written	Reading
English:	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average
German:	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> None	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> None	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> None
Others: (specify) <input type="text"/>	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average
Mother Tongue <input type="text"/>	English Language Test	Test Score	
	<input type="checkbox"/> IELTS <input type="checkbox"/> TOEFL	<input type="text"/>	

Work Experience (if any)

Period (Year)	Organisation	Position
1. -		
2. -		
3. -		

How did you get to know about BHMS?

Representative
 Advertisement
 Swiss Embassy / Consulate
 Internet
 Newspaper
 Other: (specify)

Declaration

I certify that all the information contained in this application form is complete and accurate. I am fully aware of and accept the BHMS Terms and Conditions concerning fees, fees payment procedures, refund of fees, dismissal from the School, etc., as summarised in the School's Academic Rules and the Manual of Students Rights and Regulations.

Date: _____

Signature: _____

Parents: _____ (only if student is under 18)

All disputes will be settled by the courts of Luzern, Switzerland.

