



**Application for Undergraduate Programmes**  
**Distance-Learning Students**

**1. PROPOSED COURSE OF STUDY (Please mark with an 'X' next to your choice):**

<b><u>Foundation Level/ Year 0</u></b>	<b><u>Advanced Diplomas/Year 2</u></b>	<b><u>Bachelors/Year 3</u></b>
<input type="checkbox"/> Foundation Certificate	<input type="checkbox"/> Marketing Science	<input type="checkbox"/> Marketing Science
<b><u>Diplomas/Year 1</u></b>	<input type="checkbox"/> Business Administration	<input type="checkbox"/> Business Administration
<input type="checkbox"/> Business English	<input type="checkbox"/> Shipping Management	<input type="checkbox"/> Shipping Management
<input type="checkbox"/> Business Law	<input type="checkbox"/> Tourism Management	<input type="checkbox"/> Tourism Management
<input type="checkbox"/> Marketing Management	<input type="checkbox"/> Financial & Computer Management	<input type="checkbox"/> Financial & Computer Management
<input type="checkbox"/> Business Psychology	<input type="checkbox"/> Banking Management	<input type="checkbox"/> Banking Management
<input type="checkbox"/> Finance	<input type="checkbox"/> Insurance Management	<input type="checkbox"/> Insurance Management
	<input type="checkbox"/> European Studies	<input type="checkbox"/> European Studies
	<input type="checkbox"/> Human Resource Management	<input type="checkbox"/> Human Resource Management
	<input type="checkbox"/> Business Law	<input type="checkbox"/> Business Law
	<input type="checkbox"/> Business Psychology	<input type="checkbox"/> Business Psychology
	<input type="checkbox"/> Logistics	<input type="checkbox"/> Logistics
	<input type="checkbox"/> Finance	<input type="checkbox"/> Finance
	<input type="checkbox"/> Digital Marketing	<input type="checkbox"/> Digital Marketing

*\*Each Programme has a minimum duration of one year*

**2. PERSONAL INFORMATION:**

Full Name:	
Date of Birth:	Nationality:
Native Language:	Other Languages:
Have you ever been registered as a CIM (BVI) student? <span style="float: right;">YES / NO</span>	
If YES, Please specify your former Registration No.: .....	

**3. CONTACT INFORMATION:**

Home Address (for dispatch purposes):	
Town/City:	Postcode (if applicable):
Country:	Mobile Phone No.:
E-mail:	

**4. Educational Background:**

<b>Secondary School details (below):</b>	<b>Higher Education details (below):</b>
Name of Institution:	Name of Institution:
Duration of study: From: mm/yyyy ...../..... To: mm/yyyy ...../.....	Duration of study: From: mm/yyyy ...../..... To: mm/yyyy ...../.....
Grade awarded:	Grade awarded:

**5. Supporting documents**

- a) Secondary School Certificate (unless applying for Foundation Certificate)
- b) If English is not your native language, it is required that you show sufficient command of the English language.
- c) Copy of Identification Card (ID) or Passport
- d) Copies of Certificates accompanied by Transcripts (where applicable)
- e) Receipt of payment of Application fee

Once completed, the application should be scanned and sent to [info@cimabvi.com](mailto:info@cimabvi.com). The Admissions Office will not assess applications without proof of payment of Application fee. \*Please see fee structure for more information. The cost of the Examination Centre (invigilation/courier etc.) is borne by the student.

**DECLARATION**

I hereby declare that the information submitted on this application is true to the best of my knowledge. Further, that CIM (BVI) will hold my personal information will be retained by CIM (BVI) for a reasonable amount of time and that my personal data will be used for a variety of purposes that CIM (BVI) considers to be of benefit to students including (but not restricted to) monitoring academic performance, statistical reporting, awarding qualifications and provision of services. CIM (BVI) will treat all information provided securely and in confidentiality. Further, I understand that the status of recognition of CIM (BVI) diplomas/degrees may vary from country to country and that it is my sole responsibility to enquire about the recognition status of the diploma/degree for which I am applying. Further, I agree that, if for any reason it is proved in the future, either during the duration of my studies at CIM (BVI) or after the completion of my studies, that the information with regards to the recognition of the said programme is proved to be mistaken and/or the information given to me by an authority or body was a result of negligence and/or omission, I will not have any claim against CIM (BVI). Finally, I declare that I was informed by CIM (BVI), prior my enrolment, that I am entitled to a 90% refund of my application fee within 30 days from my enrolment and that after the 30 days period is over, no refund will be available should I decide not to pursue the course. By accepting the above terms and conditions, I understand that I form a legally binding agreement.

Signed (applicant): ..... Date: .....

**OFFICIAL USE ONLY:**

Received Date: ..... Administrator: ..... Exemptions: ..... Processing Date: .....  
LOA: ..... Application fee: ..... Exemption fees: .....