

FOR OFFICE USE ONLY

Application Ref No.

Course ID

Notes

Registration date

____/____/____

MERIDIAN BUSINESS SCHOOL**APPLICATION FORM****INTERNATIONAL ADMISSIONS**

Note: Please fill this form in BLOCK LETTERS
and return along with a passport size
photograph and other supporting documents

MBS MERIDIAN
BUSINESS
SCHOOL

THE GATEWAY TO AFFORDABLE EDUCATION

First Floor, Roebuck House,
Roebuck Road,
Hainault Business Park,
IG6 3UG
0207 403 2318
admissions@mbslondon.org

Recruitment Partner**Course Details**

Course Applied					
Course ID	Awarding Body		Duration		
Intake	Feb <input type="checkbox"/>	Jun <input type="checkbox"/>	Oct <input type="checkbox"/>	Start Date	End Date

Personal Details

Title	Full Name			
D.O.B	Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Nationality
Passport No	Passport Expiry Date	Issuing Authority		

Previous Immigration History

Have you studied / visited United Kingdom or any other country in past: Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes please specify the country name:	
Visa Category	Visa Reference
Visa Expiry Date	Purpose of Visit
If studied, please specify the College	
Course Studied	Course Level
Awarding Body	Progression
Have you been refused visa to the United Kingdom or any other country: Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes please specify the reason:	

Contact Details

Current Address			
House / Door No	Street	Town	
County	Post Code	Country	
Email	Phone / Mobile		
Permanent Address			
House / Door No	Street	Town	
County	Post Code	Country	
Email	Phone / Mobile		
Next of Kin Details			
Full Name	Relation		
House / Door No	Street	Town	
County	Post Code	Country	
Email	Phone / Mobile		

Educational Qualifications

Latest Qualification	Course Level	Year passed
University / Institution	Grades	Place
Previous Qualification	Course Level	Year passed
University / Institution	Grades	Place
Previous Qualification	Course Level	Year passed
University / Institution	Grades	Place

English Language Requirement

All the courses are taught in English. You will therefore be required to demonstrate the minimum English Language competency. Course Level: Level 5 or below: must have CEFR B1 Level Equivalent or above
Course Level: Level 6 and above: must have CEFR B2 Level Equivalent or above

Test taken	Overall Scores
Listening	Writing
Reading	Speaking
Medium of past qualification	English <input type="checkbox"/> Non English <input type="checkbox"/>
Years of study in English	

Previous Employment

Company		Position	
Location		Start Date and End Date	
Company		Position	
Location		Start Date and End Date	

Statement of Purpose

Large empty rectangular box for writing the Statement of Purpose.

Please use an additional paper if you require more space to provide statement of purpose

References (Previous Institute or Company)

Referrer Name		Position	
Organisation		Phone / Email	
Referrer Name		Position	
Organisation		Phone / Email	

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Disability & Equal Opportunity Declaration

At MBS we encourage applications from student with disabilities or special needs. All applicants are assessed on their academic potential only. However, we encourage you to disclose any disability or special need, in order for us to make any necessary preparations.

Please tick the box that applies to you

- | | |
|---|---|
| <input type="checkbox"/> Dyslexia | <input type="checkbox"/> Speech Impairment / Language Barrier |
| <input type="checkbox"/> Blind / Partially Blind | <input type="checkbox"/> Chronic Medical Conditions |
| <input type="checkbox"/> Mobility Difficulties | <input type="checkbox"/> Substance Disorder |
| <input type="checkbox"/> Deaf /Hearing Impairment | <input type="checkbox"/> Mental health difficulties |
| <input type="checkbox"/> Accidents -broken limbs | <input type="checkbox"/> Short-term illnesses which affect studying |
| <input type="checkbox"/> Hidden impairments e.g. Asthma, diabetes, epilepsy | <input type="checkbox"/> if other please specify |
| <input type="checkbox"/> Medical conditions which affect studying e.g. ME | |

We shall not treat anybody any differently because of their race, Gender, Disability, Sexuality, Age, Religion and Belief.

Do you have any criminal convictions: Yes / No; if yes specify _____

TERMS & CONDITIONS *

Kindly read and sign the terms & conditions associated with admission in annexure 1

Declaration by Student

I confirm that the information provided in this application form is correct to the best of my knowledge. I hereby declare that I will accept the preferred course and abide to the college terms and conditions.

Signature:

Print Name:

Date:

Office Use only

All Document assessed and verified

Signature:

Verifier name:

Position:

Date:

Data Protection

MBS is a centre of knowledge and training. Next to its people, information is its most important asset. Because of this, the College recognises the importance of protecting its information assets and, in particular, the information relating to its staff, students and other individuals in whatever form that information is held.