



Independence House, RGEA Building, MT Lubin, Rodrigues.

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Website: www.rbs.ac.mu

APPLICATION FOR ADMISSION

Complete all pages in BLOCK CAPITALS and tick boxes as appropriate

PLEASE RETURN THIS FORM TO THE REGISTRY AT THE ABOVE ADDRESS

RGEA MEMBER Yes No

If YES, Please provide your membership number :

1. COURSE

PLEASE STATE THE QUALIFICATION FOR WHICH YOU ARE APPLYING:

.....

FOR PROFESSIONAL QUALIFICATION STATE THE LEVEL AND THE SUBJECTS YOU WILL BE TAKING:

.....

2. PROPOSED DATE OF ADMISSION (month/year)

3. TITLE (MR/MRS/ MISS/ MS/ DR)

4. SURNAME/FAMILY NAME

5. FORENAMES

6. DATE OF BIRTH (DD/MM/YY)

7. GENDER: MALE FEMALE

8. ADDRESS (PLEASE NOTE THIS IS THE ADDRESS TO WHICH THE BUSINESS SCHOOL WILL SEND ALL CORRESPONDENCE)

.....

.....

.....

MOBILE NO: **RESIDENCE NO:**

EMAIL ADDRESS:

NEXT OF KIN'S NAME: **RELATIONSHIP:**..... **CONTACT NO:**.....

9. NATIONALITY:

10. COUNTRY OF PERMANENT RESIDENCE:

ACADEMIC HISTORY

EDUCATION INSTITUTIONS ATTENDED AND QUALIFICATION OBTAINED OR ENTERED FOR (you must supply full dates).

| UNIVERSITY/POLYTECHNIC OR COLLEGE | DATES OF ATTENDANCE | QUALIFICATION AWARDED |
|--|---------------------|-----------------------|
| | | |
| | | |
| | | |
| | | |
| Other information relevant to your academic history: | | |

11. REFERENCES

Please name here the two people from whom a reference may be obtained.

REFEREE 1

Name:
Position:
Address:
.....
.....
Telephone No:
Fax No:
Email Address:

REFEREE 2

Name:
Position:
Address:
.....
.....
Telephone No:
Fax No:
Email Address:

12. CAREER HISTORY

Please give details of employment and/professional experience (Current first). Continue on a separate sheet if necessary.

| Date(s) | | Nature of work and position held | Name and address of employer |
|---------|----|----------------------------------|------------------------------|
| From | To | | |
| | | | |

13. DISABILITIES

If you have special needs owing to a disability, medical condition (including mental health difficulties) or specific learning difficulty please give details.

.....

.....

14. Do you have any criminal convictions/causes or are you subject to a pending prosecution?

YES No

If YES, please give details

.....
.....
.....

15. WHERE DID YOU FIRST LEARN ABOUT RUSHMORE BUSINESS SCHOOL AND ITS PROGRAMMES?

(Please tick one box only)

- Advertisement in (Please name newspaper/journal)
- Personal recommendation Poster
- Prospectus World Wide Web
- Other (please specify) Advertisement in Directory

I,, certify that the information provided is correct.

Signature:

Date:

The completed application form together with copies of educational certificates, transcript, birth certificate, two photo passport size photograph and application fee of Rs. 1000/- (for Undergraduate) or Rs. 2000/- (for postgraduate) should be sent to: **Independence House, RGEA Building, MT Lubin, Rodrigues.**

FOR OFFICE USE ONLY

ACCEPT – UNCONDITIONAL

ACCEPT – CONDITIONAL

CONDITIONS:

REJECT REASON(S): _____

COURSE APPLIED FOR: _____ START DATE: _____

FEES: _____

INTERVIEWED: _____

COURSE COORDINATOR'S SIGNATURE: _____ DATE: _____

DIRECTOR'S SIGNATURE: _____ DATE: _____