



الكلية الأوروبية الدولية  
EUROPEAN INTERNATIONAL COLLEGE

### ADMISSION OFFICE

APP. NO.

ID NO.

### Application for Master of Business Administration Admission

Please read the following before completing the Admission Application Form

- 1- European International College (EIC) admits students irrespective of their national origin, color, gender, disability or religion to programs offered by the EIC with equal rights and privileges.
- 2- All programs offered by EIC are accredited by the Ministry of Higher Education and Scientific Research (MOHESR) in the United Arab Emirates.
- 3- Applicants are admitted based on their qualifications as approved by the MOHESR.
- 4- Applicants are encouraged to apply early to EIC.
- 5- All items on this application form must be filled.
- 6- The following are to be included and submitted to the admission office with the application form:
  - Attested copies of Bachelor’s certificate and transcripts as approved by the MOHESR;
  - Six recent photos
  - Valid copy of Applicant’s Passport and Valid Residence Visa copy (for expats only)
  - Khulasat Qaid (For UAE Nationals only)
  - UAE National ID (all nationalities)
  - TOEFL/IELTS score report (if available when applying) as approved by the MOHESR
  - A non refundable application fee of 500 UAE Dirham
  - For Transfer Applicants: an official university transcript with full course descriptions
  - Three reference letters

#### HOW DID YOU HEAR OF EIC? (PLEASE TICK ONE OR MORE OF THE FOLLOWING)

- EXHIBITIONS     
  ADVERTISEMENTS     
  FRIENDS     
  FAMILY     
  SCHOOL VISIT  
 EIC WEBSITE     
  OTHERS -----

#### European International College (EIC) Decision

- Approved     
  Conditional Approval     
  Pending Approval     
  Declined

Notes & Comments .....

Name ..... Signature ..... Date .....

## PERSONAL DATA AND GENERAL INFORMATION

Please paste  
applicants photo  
here

1. **NAME:**

-----  
FIRST NAME

-----  
FATHER'S NAME

-----  
GRANDFATHER'S NAME

-----  
FAMILY NAME

2. **DATE OF BIRTH**

DAY

MONTH

YEAR

3. **PLACE OF BIRTH**

CITY

COUNTRY

4. **NATIONALITY** -----

5. **RELIGION** -----

5. **PASSPORT NO.** -----

**PLACE OF ISSUE** -----

**EXPIRY DATE** -----

6. **GENDER**

 MALE FEMALE

7. **MARITAL STATUS**

 SINGLE MARRIED DIVORCED WIDOWED

8. **MAILING ADDRESS**

C/O -----

P.O. BOX ----- CITY -----

COUNTRY -----

9. **TELEPHONE NO:**

HOME -----

WORK -----

MOBILE -----

EMAIL ----- EMERGENCY CONTACT NO -----

10. **APPLYING AS:**

 FIRST YEAR STUDENT TRANSFER STUDENT VISITING STUDENT

11. **SEMESTER YOU ARE APPLYING FOR:**

 FALL 20..... SPRING 20..... SUMMER I 20..... SUMMER II 20.....

12. **DO YOU NEED STUDENT RESIDENCE VISA:**

 Yes  No

**TRANSPORTATION:**

 Yes  No

**13. INDICATE TYPE OF BACHELOR DEGREE YOU HOLD OR EXPECT TO RECEIVE AND DATE**

BACHELOR DEGREE ----- DATE -----

**14. ACADEMIC HISTORY OF ALL UNIVERSITIES/COLLEGES ATTENDED**

INSTITUTION'S NAME	DEGREE/DIPLOMA/CERTIFICATE AWARDED NAME	PROGRAM OF STUDY	% CGPA	DATES ATTENDED	
				FROM	TO

**15. ENGLISH LANGUAGE PROFICIENCY:**

TOEFL SCORE ----- IELTS SCORE ----- TOEIC SCORE -----

Date of TOEFL/IELTS/TOEIC .....

16. IS YOUR FATHER / MOTHER A FACULTY/ STAFF IN EIC YES  NO

IF YES, PLEASE GIVE NAME ----- POSITION -----

**17. HAVE YOU ANY BROTHERS, SISTERS, OR OTHER FAMILY MEMBERS ATTENDED / CURRENTLY ATTENDING EIC?**

YES  NO

IF YES, PLEASE LIST THEIR NAMES AND DETAILS:

NAME(S)	RELATIONSHIP	YEAR ATTENDED

18. DO YOU HAVE ANY PHYSICAL DISABILITY?

YES

NO

IF YES, PLEASE INDICATE TYPE OF DISABILITY:

HEARING

SPEECH

VISION

OTHERS

(PLEASE SPECIFY) -----

(PLEASE PROVIDE THE MOST RECENT MEDICAL REPORT OF YOUR DISABILITY CASE)

19. PROGRAM FOR WHICH YOU ARE APPLYING:

(ADMISSION IS BASED ON APPLICANTS QUALIFICATIONS AND SUBMITTED DOCUMENTS.)

**FACULTY OF BUSINESS ADMINISTRATION**

MASTER OF BUSINESS ADMINISTRATION (MBA)

**DECLARATION:**

I CERTIFY THAT STATEMENTS AND ANSWERS TO ALL ITEMS IN THIS APPLICATION ARE DONE BY ME AND TO THE BEST OF MY KNOWLEDGE ARE TRUE. I UNDERSTAND THAT I HAVE TO PROVIDE ALL SUPPORTED DOCUMENTS UPON GRANTING A CONFIRMED ADMISSION TO AHU. I WILL BE FULLY RESPONSIBLE TO READ AND UNDERSTAND EIC RULES AND REGULATIONS AND RESPECT THEM.

APPLICANT'S NAME -----

APPLICANT'S SIGNATURE -----

DATE -----

EUROPEAN INTERNATIONAL COLLEGE (EIC)

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