

Application Form

Family (Last) Name: _____

Given (First) Name: _____

Adopted Name: _____

Date of Birth: ____ / ____ / ____ dd / mm / yyyy

Nationality: _____

Place of Birth: _____

Gender: Male Female

Marital Status: _____

Mailing Address

Street: _____

Phone: _____

Town: _____

Fax: _____

Post Code: _____

E-Mail: _____

Country: _____

Swiss Embassy/Consulate of visa application:

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)
- 2 yr Post Graduate Diploma (PGD)

- 1st yr Culinary Diploma (CLN)
- 2nd yr Advanced Culinary Diploma (CLN2)

Starting Date: January February April May July August October November

Year: _____

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

Room Preference:

- Single Room

Surcharge of CHF 2500.-- for 25 weeks

Food Preference:

- Vegetarian

Educational Data

The latest education certificate earned: _____

Name of Organisation: _____

Location: _____

Graduation Date: _____ / _____ / _____
(dd / mm / yyyy)

Special Awards: _____

Language Knowledge

	Spoken	Written	Reading
English:	<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
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="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
_____	<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

Mother Tongue: _____

English Language Test: IELTS TOEFL

Test Score: _____

How did you get to know about BHMS?

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

Work Experience (if any)

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

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.