

Application form Associate degree International Business Cohort 2016-2018

EuroPort Business School, PO Box 21510, 3001 AM ROTTERDAM, The Netherlands Tel: +31(0) 10 2012320 Internet: www.epbs.nl E-mail: info@epbs.nl		Please attach
1. Personal data		2 passport
First name:		pictures
Initial(s) Gender:	OF OM	
Surname If applicable, English name:		
Address Street number:		
Postal code City Country:		
Date of birth Place of birth:		
Telephone Mobile phone:		
E-mail address:		
Bank account Bank		
Social security number:		
2. Application for one of the following specialism of Ad International Business:		
O Marketing Management	O Small Business & Retail mana	gement
Starting date: O February 2016 O September 2016 Location: OAmsterdam ORotterdam		
3. Preliminary education:		
High school / Secondary school City: Certificate: • Yes • No		
College City:		Certificate: O Yes O No
University City:		Certificate: O Yes O No
HAVO/VWO/MBO Level 4:		Certificate: O Yes O No
TOEFL Test level:		
IELTS Test level:		
A certified copy of your diplomas, including list of marks and a copy of your ID must be sent with this		
application form to the administration of the school.		
4. He/she declares to pay	v the full tuition foo:	
• 9.750,- in one amount	Ва	nk account EuroPort Business nool:
Rabobank		oobank Rotterdam ak 333, 3011 GB Rotterdam
(for permanent Dutch residents only) Account: 1 IBAN:NL20		count: 140064591 NN:NL20RABO 0140064591 C: RABONL2U
Date: Place: Signature:		
Undersigned declares for the period (2016-2018) of the above course to be in accordance with the general and		
enrolment conditions. He or she read the general and enrolment conditions, understood it and accept them.		

Sent this form to:

EuroPort Business School

PO Box 21510

3001 AM ROTTERDAM The Netherlands

To be filled in by EuroPort Business School:

Inschrijfnr.

Datum ontvangst.....

Datum verwerkt:

Paraaf verwerkt:.....