

Certificate in Business Administration (CBA)

AVT Business School
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Application Form

I am applying for participation in the Certificate in Business Administration (CBA) program starting in month: _____ year: _____

Applicant Information

Last Name: _____	First Name(s): _____
Title or Position: _____	Division (if applicable): _____
Company: _____	Age: _____
Business Address: _____	City: _____
Country: _____	Postal Code: _____
Preferred Telephone: _____	Preferred E-mail: _____
Next of Kin (Name & Telephone): _____	

Business & Educational Information

Line of Business: _____	Company website: _____
Sales Volume or Budget: _____	Business Experience (years): _____
Management Experience (years): _____	Number of Employees: _____
International Experience (years): _____	Education prior to CBA: _____

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Person in Charge of Your Executive Education

Last Name: _____ First Name(s): _____
Title or Position: _____ Division (if applicable): _____
Company: _____
Business Address: _____ City: _____
Country: _____ Postal Code: _____
Business Telephone: _____ Business E-mail: _____

Please give two references whom the Admissions Committee may contact, if required.

Last Name: _____ First Name(s): _____
Title or Position: _____ Company: _____
Business Address: _____ Postal Code: _____
Country: _____ Business Telephone: _____
Business E-mail: _____

Last Name: _____ First Name(s): _____
Title or Position: _____ Company: _____
Business Address: _____ Postal Code: _____
Country: _____ Business Telephone: _____
Business E-mail: _____

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If the invoicing name & address is different than the above company address, please fill in invoicing name & address here

Last Name: _____	First Name(s): _____
Title or Position: _____	Division (if applicable): _____
Company: _____	Business Address: _____
City: _____	Country: _____
Postal Code: _____	Business Telephone: _____
Business E-mail: _____	Additional Information: _____

Please describe your objectives and goals, which are related to this program?

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What do you hope to gain from your participation in this program?

What are your strengths and weaknesses?

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<p>Is there any other relevant information about yourself, which will help the Admissions Committee to review your application?</p>	
<p>Please indicate your level of English skills as “Basic”, “Intermediate” or “Advanced”</p> <p>Understanding spoken English:</p> <p>Reading English</p> <p>Writing English</p>	

Further Documentation:

Please send the following documentation along with your application form:

- CV
- A copy of your Exam Diploma

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Program:

The program consists of seven topics including a simulation based management exercise, all taught at MBA level.

The program includes a Study Tour to Cambridge, USA, including visits to Harvard Business School and Sloan School of Management (MIT).

Admission Criteria:

A minimum of five years of business experience is required, as is a successful interview with a member of the Admissions Committee. The interview is conducted in English. The Admissions Committee will make the final decision on admission. The Admissions Committee will emphasize:

- Ambitions
- Leadership potential
- Business and management experience
- Candidate personal profile and English language skills

-- all to ensure a class composition which will maximize the personal learning experience of the participants.

Program Fee:

The price for the program is DKK 159,800 (about €21,300 EURO) exclusive of VAT, per participant (all inclusive), which includes the CBA preparatory course "Case Study", the CBA tuition, the 2-day simulation-based management exercise, teaching materials and cases from Harvard Business School Publishing, the Study Tour to Boston (including meals), refreshments and meals during classes, and the CBA Certificate. The program fee does not include hotel accommodation except on the Study Tour. Please note that each applicant has to pay an application fee of DKK 4,450 (about 595 EURO) exclusive of VAT. However, the application fee will only be invoiced if the applicant is accepted into the program.

Please notice also the additional cost of the optional, but highly recommended, two-day pre-courses:

"Study Preparation & Techniques" at DKK 5,750

"Basic Accounting" at DKK 5,750

Cancellation Policy:

This application form is binding if the applicant is accepted of the Admissions Committee. The program fee will be invoiced subsequently (within 14 days). The Program fee is payable within 30 days from the invoice date. Written notification of cancellation, transfer or substitution must be received by the appropriate calendar day as follows: Cancellation more than 30 days from the program start receives 50% refund of the total program fee. Cancellation 30-8 days from the program start receives 25% refund of the total program fee. Cancellation 7 or fewer days from the program start receives no refund. AVT has the right to cancel the program at any time by

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refunding the full-prepaid amount to the participants of the program. The applicant has understood the cancellation policy including the program materials and program policies from the AVT website (www.avt-people.com) when signing this application form.

Program Changes:

The course descriptions, dates, faculty and Study Tour, etc. are subject to change. AVT reserves the right to change any part of the CBA program without notice.

Signature:

This application is legally valid when received by e-mail or post, which also confirms that the applicant has understood the cancellation policy including the program materials and program policies from the AVT website (www.avt-people.com).

This is a legal contract. By signing it you personally agree to pay the program fees as described. If your company is paying the fees you must get a company employee with signature rights on behalf of the company to countersign the application in the space provided below.

“I, _____
(*please write your full name with capital letters and sign*)
who am authorized to sign for the company identified in this application, agree that said company/organization will pay the program fees as described for the applicant.”

Signature of the applicant _____ Date ____/____/20__