

Use this form for all Full Time MBA postgraduate applications.

Please complete all sections. If a section is not applicable, write N/A.

Further guidance can be obtained from the Lincoln Business School section of the university web site.

Please return the completed form and relevant documents to the:

Admissions Department

University of Lincoln

Brayford Pool

Lincoln

LN6 7TS

United Kingdom

Telephone

+44 (0)1522 886097

Email

enquiries@lincoln.ac.uk

Internet

www.lincoln.ac.uk

Personal Details

1 Full Name	Title (Mr, Mrs, Ms, Miss etc)	First Name(s)	Last Name
2 Previous Name, if changed			
3 Correspondence Address	<p>CampusUK British Education Consultants 'British Education Made Easy' www.campusuk.com</p> <p>31/11, Kamdhar Nagar 1st Street, Mahalingapuram Nungampakkam Chennai - 600 034 T : + 91 44 42009334 : + 91 44 42009335 E : contact@campusuk.com</p>		
4 Email Address			
5 Telephone Numbers Include Work, Home, Mobile			
6 Home Address (If different)	<p>Post Code</p>		
7 Sex (Male / Female)			
8 Date of Birth			
9 Age on 31 December in year of entry			

Fee Status

10 Country of Birth	
11 Nationality	
12 Country of Domicile or Area of Permanent Residence	
<i>Applicants not born in the European Union. Please state:</i>	
13 Date of first entry to the EU	
14 Date of most recent entry to the EU	
15 Date from which you have been granted permanent residence of the EU	

Programme of Study

16 Month and year of planned entry	
17 Course Title (please tick)	MBA MBA FINANCE
18 Faculty / Department	Lincoln Business School
19 Mode of Study	Full Time
20 Statement of Purpose Please state why you are a suitable candidate for the MBA programme. You may include reference to the following: <ul style="list-style-type: none">• part-time work• volunteer activities• internship• community activity• student leadership role(s) during university (e.g. clubs and organisations)• experience of leading or working within an organisation• charity work Your statement should be between 300-500 words.	

Last two educational establishments attended

21 Institution 1, including address	
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22 Qualification, with date obtained

23 Institution 2, including address

24 Qualification, with date obtained

Academic Qualifications

Please give details of all your academic qualifications. Continue on a separate sheet if necessary.

Qualification	Subject	Date Obtained (Month & Year)	Institution and Place of Study	Results Grades, Marks, Degree Class etc.	CATS Points (If Applicable)
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Language Qualifications

25 Language Qualification

Type and score e.g. IELTS, TOEFL

The MBA minimum requirement for entry is IELTS 6.0 or equivalent.

26 Qualification, with date obtained

27 Institution, including address

Work Experience

Please give details of work experience, training and employment. Continue on a separate sheet if necessary.

Job Title	Name of Organization	Full Time Part Time	Nature of Work/Training	From Month Year	To Month Year
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Disability / Special Needs

28 Please indicate any physical or other disability or medical condition including any which may necessitate special arrangements or facilities

Please tick which of the following apply:

0. You do not have a disability nor are you aware of any additional support requirements in study or accommodation

1. You have dyslexia
 2. You are blind/ are partially sighted
 3. You are deaf/ have a hearing impairment
 4. You are a wheelchair user/ have mobility difficulties
 5. You need personal care support
 6. You have mental health difficulties
 7. You have an unseen disability, e.g. diabetes, epilepsy, asthma.
 8. You have two or more of the above disabilities
 9. You have a disability not listed above

Criminal Convictions

29 Have you ever been convicted of a criminal offence ?

Please tick ONE of the following:

Yes

No

Please see guidance notes for further details.

Funding for Your Studies

30 Please state how you will fund your fees

31 Please state how you will cover your living expenses during your studies

Referees

References should be submitted with your application.

Note: At least one of your referees should be able to comment on your most recent academic performance

32 Name of First Referee	
33 Address	
34 Email	
35 Name of Second Referee	
36 Address	
37 Email	

Declaration

I confirm that, to the best of my knowledge, the information given in this form is correct and complete. I also understand that in accepting any offer of a place I might receive I agree to abide by the rules and regulations of the University of Lincoln. I also understand the terms and conditions of application specified in the prospectus, including that the university does not undertake any absolute obligation to provide educational services in the manner specified in the prospectus or in any other document. I will provide original certificates on or before enrolment to confirm my existing academic qualifications.

Signature

Date**Additional Information for International Students:**

Please check you have included the following items and return your completed application to the address noted on the front of this form:

- An official copy of your university/college qualification certificate;
- An official copy of your university/college transcript;
- Details of English language qualification, if English is not your first language;
- A photocopy of your passport.

Should you require further details on the items to include, please contact the Admissions Department for additional guidance.