



UNIVERSITY COLLEGE OF THE CARIBBEAN COMMONWEALTH DEGREES



*Commonwealth Executive Masters in Business Administration
Executive Masters in Public Administration Programmes*

GRADUATE ADMISSION OFFICE

Graduate Admission Application

Send the application and US \$15 application fee to: CEMBA/CEMPA Programme Director
Commonwealth of Learning Executive Graduate Office
University College of the Caribbean
17 Worthington Avenue, Kingston 5
Jamaica, West Indies

Manager's Cheques should be made payable to the University College of the Caribbean. Your application will not be processed without the required fee. Request official transcripts from all previous institutions be sent to address above.

<p>1. _____ Last Name</p> <p>_____ First Name</p> <p>_____ Middle Name</p>	<p>2. Gender: _____</p> <p><input type="checkbox"/> Male</p> <p><input type="checkbox"/> Female</p>	<p>3. Date of Birth: _____ / _____ / _____ Mo. Day Yr.</p> <p>Place of Birth: _____ City State Country</p> <p>Nation of Citizenship: _____ Country</p>
<p>4A. Permanent Address:</p> <p>Street & Number _____ City _____ Country _____</p> <p>Mailing Address: (If different from above)</p> <p>Street & Number _____ City _____ Country _____</p> <p>Phone Number: (____) _____</p> <p>Work Number: (____) _____</p> <p>Fax Number: (____) _____</p> <p>E-mail Address: (____) _____</p>		<p>4B. In case of emergency, indicate the person you request the University to contact:</p> <p>Last Name _____ First Name _____ M.I. _____</p> <p>Street & Number _____ City _____ Country _____</p> <p>Phone: _____</p> <p>Relationship: _____</p>
<p>5. If your transcripts, test scores, etc. might arrive under any name(s) other than those listed above, enter that name here:</p> <p>_____</p>	<p>6A. Degree Goal: (specify one)</p> <p><input type="checkbox"/> CEMBA <input type="checkbox"/> CEMPA</p>	
<p>7. Have you ever attended UCC?</p> <p>Yes (Term: _____ Year _____) <input type="checkbox"/> No</p> <p>Programme: _____</p>	<p>6B. For which term, in which year, do you seek admission?</p> <p>January _____ September _____</p>	
<p>9. Highest degree earned prior to the anticipated term of enrollment:</p> <p>Bachelor's Master's Doctorate Specialist Other _____</p>		<p>8. Are you currently enrolled at UCC?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>10. Earned GPA:</p> <p>Bachelor's: _____</p> <p>Master's: _____</p>		

11. An official transcript for each post secondary school, college, or university you have attended must be provided.

Please list in chronological order every postsecondary institution you have attended or will attend prior to entering this university. Include this university if you attended previously. For multi-campus institutions, indicate the specific campus.
Failure to list all institution could result in your application being denied or your admission being rescinded. Use a separate sheet if necessary.

Enter dates of attendance (including present enrollment) and degrees earned or expected before attending this university. Include Associate degrees, certificates, or diplomas.

Enter credit earned or expected from each institution attended.

School (Please do not abbreviate)	City, State or Nation	Dates of Attendance				Degree/Date			Credit Hours	
		From		To		Type	Yr.	Mo.	Earned/Expected	
		Mo.	Yr.	Mo.	Yr.					

12. If you have taken any of the tests below, enter the month and year. Official records of all test scores must be provided.

Test	Highest Total score earned	1 st time		2 nd time		3 rd time		4 th time	
		Mo.	Yr.	Mo.	Yr.	Mo.	Yr.	Mo.	Yr.
GRE									
GMAT									
CEMAT									
Other									

13. If you answer yes to any of the following questions, submit a full statement of the relevant facts and attach to this form. You may be required to furnish the university with copies of all official documents explaining the final disposition of the proceedings

Have you ever been charged with or subject to disciplinary action for scholastic or any other type of misconduct at any educational institution?

Yes No

14. List any other professional qualifications that you may have

Name of Programme/Course	Institution (Do not abbreviate)	Date

15. **Occupational or Professional Experience after Graduation from College:** Indicate how you spent or how you plan to spend all the time from graduation until enrollment at the University College of the Caribbean. Use additional paper, if needed.

Position	Location/Address	From	To

Person who referred you to UCC under Collaborative Recruitment Programme

 Name Programme (if known) Telephone

Where else have you heard about UCC?

Radio Newspaper Brochure Website Word of Mouth Other _____

I understand that this application is for admission to the University College of the Caribbean Commonwealth Executive Masters Degree Programmes; I also understand and agree that I will be bound by the university's and the Commonwealth of Learning regulations concerning application deadline dates and admission requirements. I further agree to the release of any transcript, student record, and test score(s) to the University College of the Caribbean. I certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application may result in disciplinary action, denial of admission and invalidation of credits or degrees earned. If admitted, I hereby agree to abide by the policies of the University College of the Caribbean and Commonwealth of Learning and the rules and regulations of the university and its Board of Directors. Should any of the information I have given change prior to my entry to the university, I shall immediately notify the Graduate Admissions Office. I understand that the US\$15 that I submit with this application is a non-refundable fee.

 Applicant's Signature

 Date