



Internal use only

ID #: _____

For Administration use only

1. APPLICATION

Semester(Applying for)

- ☐ Fall
- ☐ Spring
- ☐ Summer

Degree(Applying for)

- ☐ Bachelor's Degree
- ☐ Master's Degree
- ☐ PhD

Photo

please include
2 passport size photos

Academic Year: 20____/20____

2. PERSONAL DETAILS

Surname/Family Name: _____

First Name: _____

Father's Name: _____

Permanent Address and Postal Code: _____

Contact Details
(Please include International dialling codes)

Mobile: _____

Email: _____

Date of Birth: _____ Gender: ☐ Male ☐ Female

Natinality: _____

☐ EU ☐ Non-EU ☐ If Non-EU Specify: _____

Passport No. & Validity: _____ Do you need a Student Visa? ☐ Yes ☐ No

Blood Type: _____ Disability Needs: _____

Any health issues that we need to be aware of: _____



3. PROGRAM APPLYING FOR

Faculty of Business & Economics	Faculty of Arts & Humanities	Faculty of Science & Technology
Undergraduate Program	Undergraduate Program	Undergraduate Program
<input type="radio"/> Business Administration	<input type="radio"/> Interior Design	<input type="radio"/> Computer Science
<input type="radio"/> Advertising & Marketing	<input type="radio"/> Graphic Design	<input type="radio"/> Management Information Systems (MIS)
<input type="radio"/> Finance & Investment	<input type="radio"/> Law (Greek/Cypriot/English)	
<input type="radio"/> Accounting		
Graduate Programs	Graduate Programs	
<input type="radio"/> Masters in Real Estate Management	<input type="radio"/> Master in Landscape Architecture	
<input type="radio"/> MBA	<input type="radio"/> MBA Online	
Admissions Status		
<input type="radio"/> Undergraduate	<input type="radio"/> Transfer	<input type="radio"/> Freshman
<input type="radio"/> Graduate	<input type="radio"/> Other:	

4. ACADEMIC BACKGROUND (SECONDARY/OTHER UNIVERSITY)

Name of School, College, University	Address	Major	Diploma/Degree	Date (Start/End)

5. HAVE YOU TAKEN ANY OF THE FOLLOWING TESTS?

TEST	TEST DATE (MM / YYYY)	SCORE
TOEFL		
IELTS		
IGCSE		
Others		

6. CONTACT PERSON IN CASE OF EMERGENCY

First Name		Relation	
Last Name		Mobile Number	
		Phone Number	

7. DECLARATION BY CANDIDATE

I certify that the information provided in this application and the information provided in all supporting documents and forms is true and accurate in all material respects, to the best of my knowledge. I further understand that misrepresentation or material omissions made in this application, render morally and legally liable.

Date: Signature: