

University Diploma Application Form 2024-2025

Sports Management

Candidate Information

Family name Gender M F

Name

Father's name

Marital status Single Married Divorced Widowed Separated

Birth date

Birth Place City: Country :

Nationality Second nationality (if applicable)

For foreign students

Passport number Issue date

Expiry date

Residency card number Issue date

Expiry date

Address

Building Street

City P.O Box

Phone number Mobile

Email address

Education

High school:

Series _____

Institution _____

Year _____

Session _____

Higher Education					
Institution (name, city, country)	Faculty (name, city, country)	Study years		Degree and academic distinction	Date of completion
		From	To		

Professional Experience

Institution/Company	Country	Period		Position	Salary per month USD	Full-Time?
		From	To			
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No

Languages level

A : Excellent ; B : Good ; C : Intermediate ; D : Weak

Language	Read	Written	Spoken	Understood
	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D
	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D

Associative Activities

Mention below the associations you are part of or have been part of

Association	Year
_____	_____
_____	_____
_____	_____

Other information

1. What would be the impact of this program on you professionally?

2. What would be the contributions of this program on a personal level?

3. Describe yourself in 5 years

I hereby certify that all my declarations in response to the questions above, are correct, complete and accurate

Signature : _____ Date : _____

Reserved for the USJ Business School's administration

Supporting documents to attach to your file if you are an external candidate to the FGM

1. Copy of the Baccalaureate
2. Certified copy of your diploma with its equivalence (equivalence is essential but may take some time so you can start the procedure and submit the receipt at this stage)
3. Certified copy of transcript
4. 2 Passport-sized photos
5. Copy of your identity card and a recent family extract
6. Application fees of \$75 to be paid at the campus, building A, 1st floor

** Students from outside the FGM will be called for an interview with the Dean and the master's coordinator

***A **non-refundable** advance on tuition fees of \$ 200 will be paid upon application submission and **deducted from the first tuition payment**