





Registration

Diploma of Advanced Studies | Certificate of Advanced Studies | Individual modules

DAS in Strategic Marketing | CAS in Branding & Digital Marketing | CAS in Analytical Marketing 2015/2016

Please	attach	the	following	documents
	attaon		ronoming	aoounionio

CV in English	Copy of your identity document
Certified copies of your qualifications	Covering letter

Passport photos

Please send your completed application file by email and by post to

HEC Genève, formation continue
Strategic Marketing
Johanna Brunneder
Université de Genève
Boulevard du Pont-d'Arve 40
1211 Genève
Switzerland

marketing@unige.ch

The information provided will be treated in the strictest confidence in accordance with data protection legislation.

Personal details

Please complete in block capitals.
□ Ms/Mrs □ Mr
Surname/Family name:
First name: Middle name:
Date of birth (day/month/year):
Occupation:
Swiss nationality: 🛛 yes / 🗋 no Canton: Nationality (ies):
Mailing address: (tick one box only)
Personal Dusiness
Business contact details
Company/Institution:
Address:
Post code/City/Country:
Tel.:Fax:
E-mail:
Personal contact details
Address:
Post code/City/Country:
Tel.:
E-mail:
AVS
Since 2011, the enrolment number for students at Swiss universities is based on the AVS number.







AVS number:
If you do not have an AVS number (Swiss social security system), you will be allocated one by the University of Geneva. Please provide the
following information in the event that your identification data (Family name, first name, date of birth) is not unique in the Swiss information system:
Surname/Family name of father : First name of father :
Surname/Family name of mother: First name of mother:
Education
Previous university education
Have you enrolled previously in a Swiss higher education institution? Yes/No
Swiss enrolment number (SIUS)
If you are not able to provide your enrolment number, please give the name of the last higher education institution you attended in Switzerland.
This will enable us to retrieve your enrolment number:
End of Study level
Federal Certificate of Competence (CFC)
□ Vocational school-leaving certificate
General school-leaving certificate / Baccalaureate (secondary)
Bachelor/Master from University of Applied Sciences / University of Teacher Education
Bachelor/Master/Doctorate from University or Federal Institute of Technology
Cther:
Highest university qualification obtained University :
Country:
City:
Degree (type of certificate): Bachelor Baster Postgraduate Certificate PhD
Full title of qualification:
Start year : Year of completion:
Number of semesters : Number of ECTS credits earned :
Additional information
How did you find out about this course? (tick all that apply)
Personal recommendation
□ My company
L Education/careers adviser
Newspaper advertisement => state which:
University of Geneva brochure / prospectus / poster / continuing education course catalogue
University of Geneva continuing education website www.unige.ch/formcont
Another website => state which: www
Direct enquiry to the University of Geneva
E-mail advertising the course
At a trade fair or show (e.g. Salon RH, Salon de l'Etudiant) => state which:
Other:
Other experience of continuing education over the last two years:
(Please include all types of education and training, including seminars, symposia, conferences, debates, etc.) No other experience of continuing education
Number of courses of one day or less (≤ 8 hours):
Number of courses of one day or less (> 8 nours).

Number of courses of more than one day (> 8 hours):

Number of award-bearing courses (Certificate/Diploma/Master of Advanced Studies, etc.):







Employment				
Are you currently in employm	ent?			
Yes, full-time				
☐ Yes, part-time => Percentag	e worked:%			
□ No => because you are:	Seeking employment	□ On training leave □ Retir	red	
	□ Other, please specify:			
If you are not currently in emplo	yment, please complete the secti	on below based on the last positi	on in which you were employed.	
Role (job title):				
1				
Self-employed Senio	r manager 🛛 Middl	e manager 🛛 Employee		
Sector:				
□ Self-employed business				
Public administration or simi	lar 🛛 Euroi	pean organisation		
Private company				
Size of company:				
1 employee	2 to 10 employees	11 to 50 employees	□ 51 to 100 employees	
□ 101 to 500 employees	☐ 501 to 1000 employees	Over 1,000 employees		
• ·	re optional, but help us get a bette	•	situation.	
i ne data are kept confidential a	nd are strictly used for statistical	purposes.		
Civil status: Esingle Emarried	l Dcivil partner Ddivorced Dse	narated Dwidowed Dother		
Civil status: 🗆 single				
Birth place: (Country : canton if Switzerland, département if France)				
Comments				







Dee		
кео	IISII	ation

Date:....

Registration				
I would like to enrol in the:				
DAS in Strategic Marketing and agree to pay the sum of CHF 11'500 on receipt of confirmation of my registration.				
•••	Marketing and agree to pay the sum of CHF 5'200 on re	eceipt of confirmation of my registration.		
I choose the following elective	e module:			
CAS in Analytical Marketing	g and agree to pay the sum of CHF 5'200 on receipt of c	confirmation of my registration.		
I choose the following elective	e module:			
I would like to attend the follow				
Consumers Insights	Customer Relationship Management	Marketing Strategy		
Brand Management	Optimising Return on Marketing Investment	Arketing 2.0		
Service Marketing	Managing & Marketing Innovation	Advanced Pricing		
Marketing Communications				
and agree to pay the fees due or	n receipt of confirmation of my registration (CHF 1'700	per module).		
Cancellation conditions				
- Any withdrawal happening 30 o	open days before the start of the program will incur a fee	e of CHF 10% complete amount.		
- Any withdrawal happening less than 30 open days before the start of the program will incur a fee of 50% of the complete amount.				
	s of the first day of the programme.			
- In case of withdrawal, the program coordinator has to be notified in written form				
The information provided will be treated in the strictest confidence in accordance with data protection legislation.				
Incomplete applications will not be considered.				
By signing this form, you confirm that the information you have given is correct and complete and that you have read, understood and agreed				
with all requirements and conditions above mentioned.				

.....Signature: