## Registration



## Diploma of Advanced Studies | Diplôme de formation continue

## DAS in **Aviation Management** 2018–2019

PLEASE ATTACH THE FOLLOWING DOCUMENTS

☐ Curriculum vitae	$\square$ Copy of your identity document	$\square$ Copies of diplomas		
☐ Motivation letter	☐ Letter of recommendation from current employer			
COMPLETED FILE to be returned to:	Elisabeth Larsson Program Coordinator GSEM, University of Geneva - 1211 Genev	ra 4		
	aviation-gsem@unige.ch	•		
The information provided will be treated	d in the strictest confidence in accordance with data p	rotection legislation.		
Personal data	L			
reisoliai uata				
Please complete in block capitals				
,				
☐ Ms./Mrs. ☐ Mr.				
Surname/Family name:		Maiden 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 business	<b>BILLING ADDRESS</b> □ personal □ business		
BUSINESS CONTACT DETAILS				
Company/Institution:				
Address:				
Post code/City/Country:				
Tel:		Fax:		
E-mail:				
PERSONNAL CONTACT DETAILS				
Address:				
Post code/City/Country:				
Tel :		Fax:		
E-mail:				
AVS				
Since 2011, the enrolment number for st	udents at Swiss universities is based on the AVS numb	er.		
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 (Last name, first name, date of birth) is not unique in the Swiss information system:				
Surname/Family name of your father :		. First name of your father :		
Surname/Family name of your mother:		First name of your mother:		



<pre>— Education</pre>								
DDEN/IOUS LINE (TOS)	FRUCATION							
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							
	om University of Applied Sciences / Un	•						
	Ooctorate from University or Federal Ins							
□ Other:								
	QUALIFICATION OBTAINED							
University:								
Country:								
City								
Degree (type of certific		☐ Master	☐ Postgraduate Certificate ☐ Ph D					
Full title of qualification		Voca of completion						
Start year:		Year of completion :						
Number of semesters		Number of EC13 cred	lits earned :					
Additio	onal information							
	JT ABOUT THIS COURSE? (tick all that a	apply)						
☐ Personal recomme	ndation							
☐ My company								
☐ Education/careers								
• •								
University of Geneva brochure / Prospectus / Poster / Continuing education course catalogue								
□ · · · · · · · · · · · · · · · · ·								
	va continuing education website www	uunige.ch/formcont						
☐ Another website =	va continuing education website www	uunige.ch/formcont						
☐ Another website = ☐ Direct enquiry to t	va continuing education website www -> state which: he University of Geneva	uunige.ch/formcont						
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Additional information						
EMPLOYMENT						
Are you currently in employment?  Yes, full-time						
☐ Yes, part-time => Percentage worked	d :%					
☐ No => because you are:	$\square$ Seeking employment	$\square$ On training leave	☐ Retired			
	If you are not currently in employment, please complete the section below based on the last position in which you were employed.					
Role (job title):						
Level	□ Caniar managar	☐ AA: ddla managar	□ Fleves			
☐ Self-employed	☐ Senior manager	☐ Middle manager	☐ Employee			
Sector						
Self-employed business		□ NGO				
☐ Public administration or similar		$\square$ European organisation				
Association		$\square$ International 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			
The following three questions are optional, but help us get a better understanding of our students' situation. The data are kept confidential and are strictly used for statistical purposes.						
Civil status:	$\square$ single $\square$ married	☐ civil partner ☐ divorced ☐ separated	d $\square$ widowed $\square$ other			
Number of children:						
Birth place (Country; Canton if Switzerland; Departement if in France):						
Comments:						
Desistantian						
Registration						
I would like to enrol on the:  DAS in Aviation Management 2018-	2010					
	<del>-</del>	on of my registration. Mandatory registration fo	ee USD 400			
I would like to attend the following mo	·	, , ,	·			
☐ Module 1 ☐ Module 2	Module 3  Module	4 Module 5 Module 6				
☐ Module 7 ☐ Module 8	☐ Module 9 ☐ Module	·				
and agree to pay the due amount on	receipt of confirmation of my reg	sistration (USD 2,500 per module). Mandatory	registration fee USD 400			
<b>CONDITIONS</b> Fees will be payable in full once the cou	irse has begun.					
rees will be payable in rail once the cou	nse nas segun.					
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.						
Date:	Sig	nature:				