## **REGISTRATION**



## Master of Advanced Studies | Maîtrise universitaire d'études avancées

## MAS in **Toxicology**

September 2022 – June 2024

PLEASE ATTACH THE FOLLOWING DOCUMENTS								
□ Curriculum vitae	☐ Copy of your identity document	□ ID Picture						
☐ Copies of relevant qualifications	□ Covering letter							
□ For candidates residing in Switzerland or who already lived/studied/worked in Switzerland with an existing AVS number (13 digits): a copy of any document with the AVS number (e.g. Swiss Health Insurance Card).								
COMPLETED FILE to be returned with handwritten signature before 31 July 2022 to:								
Dr	Jean Terrier							
Service of Pharmacology and Toxicology								
Geneva University Hospitals								
Rue Gabrielle-Perret-Gentil 4 – 1211 Genève 14								
ma	as-toxicology@unige.ch							
<b>-</b> 1 · 6 · 0 · 1 · 1 · 1 · 1 · 1								

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

Personal data					
Please complete in block capitals					
☐ Ms./Mrs. ☐ Mr.  Surname/Family name:  First name:  Date of birth (day/month/year):  Occupation:					
Swiss nationality:	☐ yes ☐ no Canton:Nationality(ies):				
MAILING ADDRESS: (tick one box only)	□ personal □ business BILLING ADDRESS: □ personal □ business				
BUSINESS CONTACT DETAILS Company/Institution: Address: Post code/City/Country: Telephone: E-mail:					
PERSONNAL CONTACT DETAILS Address: Post code/City/Country: Telephone: E-mail:					
AVS Since 2011, the enrolment number	for students at Swiss universities is based on the AVS number.				
AVS number:					
	er (Swiss social security system), you will be allocated one by the University of Geneva. Please provide the following identification data (Last name, first name, date of birth) is not unique in the Swiss information system:  City of birth:				
Surname/Family name of your fath	er:First name of your father:				
Surname/Family name of your mother: First name of your 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) $\hfill \square$ Bachelor/Master from University of Applied Sciences / University of Teacher Education Bachelor/Master/Doctorate from University or Federal Institute of Technology HIGHEST UNIVERSITY QUALIFICATION OBTAINED University: Country: City: Degree (type of certificate: ☐ Bachelor ☐ Master ☐ Postgraduate Certificate □ PhD Full title of qualification: Start year: ......Year of completion: ..... Number of semesters:

Additional information
Additional information
HOW DID YOU FIND OUT ABOUT THIS COURSE? (tick all that apply)
□ Personal recommendation
☐ My company
☐ 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:
☐ 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'étudiant) => 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 more than one day (> 8 hours:
Number of award-bearing courses (Certificate/Diploma/Master of Advanced Studies, etc.):



Additional information	on						
EMPLOYMENT							
Are you currently in employment?  ☐ Yes, full-time ☐ Yes,part-time => Percentage wor ☐ No => because you are:	☐ Seeking employmen☐ Other, please specif	y :					
Role (job title):							
Lovel							
<b>Level</b> □ Self-employed	☐ Senior manager	□ <i>N</i>	liddle manager	□ Emp	loyee		
Sector  ☐ Self-employed business ☐ Public administration or similar ☐ Association ☐ Private company	□ NGO □ European organisat □ International organ						
Size of company							
☐ 1 employee ☐ 51 to 100 employees	☐ 2 to 10 employees ☐ 101 to 500 employee		to 50 employees o1 to 1000 employees	□ over	1,000 employees		
Comments:							
Registration							
<ul> <li>I would like to enrol in the MAS in TOXICOLOGY</li> <li>□ Without the practical part of Module 13 (Animal experimentation) and agree to pay the sum of CHF 11,000 on receipt of confirmation of my registration.</li> <li>□ With the practical part of Module 13 (Animal experimentation) and agree to pay the sum of CHF 11,000 plus an extra charge of CHF 1,100 for the practical part of Mod. 4 on receipt of confirmation of my registration.</li> <li>Only candidates to engage in animal testing in the near future will be admitted to the practical part of Module 13.</li> </ul>							
I would like to attend the following	g module/s (for persons v	who do not seel	k the MAS degree):				
Part A of Module 1 must be complet	•	0 ,					
☐ Mod. 1 ☐ Mod. 2 ☐ Mod. 9	•	□ Mod. 4 □ Mod. 11	☐ Mod. 5 ☐ Mod. 12	☐ Mod. 6 ☐ Mod. 13	□ Mod. 7 □ Mod. 14		
Special fees for individual modules				-	•		
CANCELLATION CONDITIONS  Any withdrawal before the start of the programme will incur an administration fee of CHF 400 Fees will be payable in full once the course has begun. 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:		Handwri	tten Signature:				