Registration



Master of Advanced Studies | Maîtrise universitaire d'études avancées

MAS in Children's Rig	hts 2017 — 2018		
PLEASE ATTACH THE FOLLOWING	DOCUMENTS		
☐ Curriculum vitae	☐ Copy of your identity document	☐ Copies of your qualifications	\square Letter of motivation
☐ Two letters of reference from peo	ple in a position to judge your professional	and/or academic abilities	
Proof of payment of the application	on fee of CHF 150		
	d or who already lived/studied/worked in Sv ple on your swiss health insurance card). Th		
COMPLETED FILE to be returned before 1st November :	2016 Université de Genève - Valais C Center for Children's Rights stu P.O. Box 4176 – CH - 1950 Sion 2 Fax +41 (0)27 205 73 93 E-mail	udies L	
The information provided will be trea	ated in the strictest confidence in accordan	ce with data protection legislation.	
Personal data			
Please complete in block capitals			
☐ Ms./Mrs. ☐ Mr.			
Surname/Family name:		Maiden name:	
First name:		Middle name:	
Date of birth (day/month/year):			
Occupation:			

MAILING ADDRESS	☐ personal ☐ business
(tick one box only)	·

BILLING ADDRESS	nersonal	husiness
DILLING ADDRESS	- personai	

Canton: Nationality(ies)

BUSINESS CONTACT DETAILS

Company/Institution: Address:

Swiss nationality:

Post code/City/Country:

Tel: E-mail:

PERSONNAL 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.

 \square yes

□no

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 :

...... First name of your mother:..... Surname/Family name of your mother:



Education					
PREVIOUS UNIVERSITY EDUCATION					
Have you enrolled previously in a Swiss higher education institution?					
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 Vocational school-leaving certificate General school-leaving certificate Bachelor/Master from University of Bachelor/Master/Doctorate from University of	ate / Baccalaureate (secondary) of Applied Sciences / University University or Federal Institute o				
HIGHEST UNIVERSITY QUALIFICATION	ORTAINED				
University:	ODIANED				
Country:					
City					
Degree (type of certificate):	☐ Bachelor	□ Master	☐ Postgraduate Certificate	☐ Ph D	
Full title of qualification:			8		
Start year:		Year of completion :			
Number of semesters :		Number of EC15 crea	its earned :		
Number of semesters : Knowledge of English		<u></u>		Good	
Number of semesters : Knowledge of English Preferred writting language	☐ Mother tongue	Excellent ☐ English	□ Very good	_	
Knowledge of English	☐ Mother tongue ☐ French	☐ Excellent		_	
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Additional inform HOW DID YOU FIND OUT ABOUT THIS Personal recommendation My company Education/careers adviser Newspaper advertisement => state University of Geneva continuing et Another website => state which: Direct enquiry to the University of E-mail advertising the course At a trade fair or show (e.g. Salon Other: OTHER EXPERIENCE OF CONTINUING E	Mother tongue French COURSE? (tick all that apply) te which: rospectus / Poster / Continuing education website www.unige. Geneva RH, Salon de l'Etudiant) => sta	Excellent English g education course catalogue ch/formcont te which: O YEARS symposia, conferences, debates, et	□ Very good	Good	
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Additional info	ormation			
EMPLOYMENT				
Are you currently in employment? ☐ Yes, full-time				
☐ Yes, part-time => Percentage worke	d :%			
☐ No => because you are:	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 ☐ Self-employed	☐ Senior manager	☐ Middle manager	☐ Employee	
ш зеп-етіріоуей 	□ Sellioi Illallagei	□ Middle manager	ш Employee	
Sector				
Self-employed business		□ NGO		
☐ Public administration or similar		☐ 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 optic The data are kept confidential and are	onal, but help us get a better unders strictly used for statistical purposes.	standing of our students' situation.		
Civil status:	\square single \square married	\Box civil partner \Box divorced \Box separated	\square widowed \square other	
Number of children:				
 Birth place (Country; Canton if Switzerl	and; Departement if in France):			
Comments:				
Registration				
I would like to enrol on the:				
\square MAS in CHILDREN'S RIGHTS and agr	ee to pay the sum of CHF 15,000 o	n receipt of confirmation of my registration.		
CANCELLATION CONDITIONS				
	programme will incur an administra	ation 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 co	orrect and complete.		
Payment of application fee (CHF 150)				
Name: Postfinance Address: Rue du Mont-Blanc 18;	– CH-1201 Genève			
Account n°: 12-3836-6				
IBAN: CH57 0900 0000 1200 BIC: POFICHBEXXX	, 3030 p			
Beneficiary: Formation continue Université de Genève — CH-1211 Genève 4				
Please include this reference number in your payment: FO6359/MCR				
Date:	Signa	ature:		