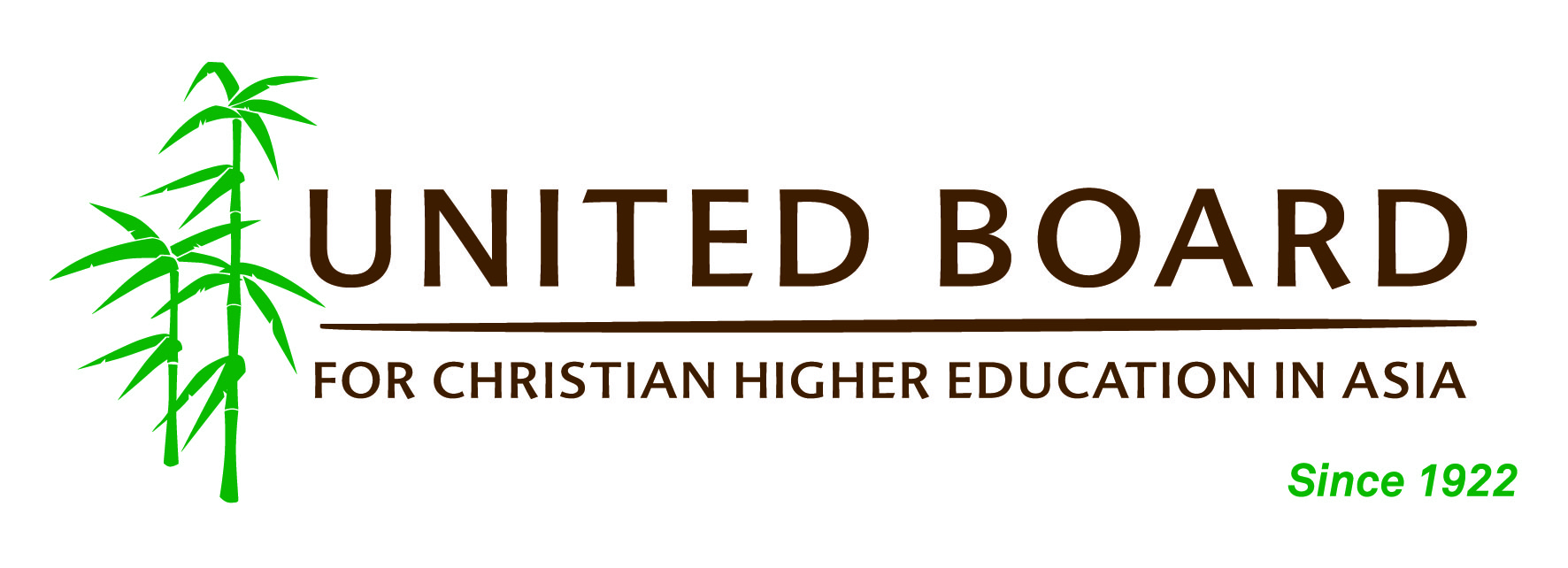
****

**2020 Intensive English Language Program (Non-Degree)**

**Application Form**

*Please fill out all the applicable information below, as detailed as possible.*

***Data Privacy Clause:*** *By completing this form, I hereby agree that Miriam College may collect, use, disclose and process my personal data for the purpose/s of IELP application. Requests for inspection, amendment, or restriction of records must be in writing and addressed to the Miriam College Language Learning Center and must specify the reasons for the request. MC reserves the right to respond appropriately according to law.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PERSONAL INFORMATION** | | | | |
| Name: (last name) | (first name) | | | (middle name) |
| Preferred Name: | Gender: | | Birth Date: (dd/mm/yy) | |
| Email: | | Phone Number: ( ) | | |
| Nationality: | | Current Residence Country: | | |
| Permanent Address: | | | | |
|  | | | | |
| Mailing Address: (If different from above) | | | | |
|  | | | | |
| Skype Address (if any): | | | | |
|  | | | | |
| **HOME INSTITUTION** | | | | |
| Name of Institution: | | | | |
| Department: | | Position/Title: | | |
| Employment Period: (mm/yy until mm/yy) | | | | |
| Responsibilities: | | | | |
|  | | | | |
| **EDUCATION** | | | | |
| *Please list the most recent degree program.* | | | | |
| Name of Institution: | | | | |
| Degree obtained (e.g. BA in English): | | | | |
| Study Period: (mm/yy until mm/yy) | | | | |
| Country: | | Language of Instruction: | | |
|  | | | | |
| **ENGLISH PROFICIENCY** | | | | |
| *Identify any English proficiency test you have taken:* | | | | |
| Test Name: | | Year Taken & Score: | | |
| *Rate your English Proficiency (Poor, Fair, Good, Excellent)* | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | Listening: | Speaking: | Reading: | Writing: | | | | | |

|  |  |
| --- | --- |
| **OTHERS** | |
| Do you have any special dietary needs (e.g. food allergies)? |  |
| Do you have any health issues/problems we should be aware of? |  |
| Photo /Video Consent: I consent to United Board’s use of photographs or video recording that are taken of me while participating in the Intensive English Language Program for the use in United Board’s brochures or program materials that are distributed both in printed form and on the Internet. No payment will be made for use of these photographs. | Yes / No |
|  | |
| **ADDITIONAL QUESTIONS** | |
| 1. State your purpose for participating in the Intensive English Language Program. (300 words) 2. What initiatives you would like to bring back to your home institution after completing the Intensive English Language Program? (200 words) | |

*I declare that the information given in support of this application is accurate and complete. I understand that any misrepresentation will result in the disqualification of my application for the Intensive English Language Program.*

Signature: Date: