

CeDEP Application Form 2009

This form must be returned to the address overleaf by 31 October 2008

MSc, Postgraduate Diploma and Postgraduate Certificate programmes for External Students

Please tick appropriate box:

	MSc	Postgraduate Diploma	Postgraduate Certificate		MSc	Postgraduate Diploma	Postgraduate Certificate
Agricultural Economics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Poverty Reduction: Policy and Practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applied Environmental Economics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sustainable Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Managing Rural Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Biodiversity Conservation and Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Agribusiness for Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Short Course Scheme 2009

Please indicate which category (see page 32):

Category I – Professional updating
 Category II – Sampler
 Category III – Qualifier

Please indicate which individual modules you wish to study in 2009 (a maximum of 3)

Module title:

Module code:

Please complete this form in BLOCK CAPITALS

1 Family name _____ 2 First name(s) _____

3 Title: Mr Mrs Ms Other

4 Gender: Male Female

5 Date of Birth _____

6 Nationality _____

7 Address for Correspondence _____

City/Town _____ State/County _____

Postcode _____ Country _____

8 Work phone _____ 9 Home phone _____ 10 Mobile phone _____

11 Fax no _____ 12 Work email _____ 13 Home email _____

14 Academic and Professional Qualifications

	Name of University/Institution	Title / Subject	Grade/GPA	Date Awarded
First Degree or Diploma	_____	_____	_____	_____
Postgraduate Degree or Diploma	_____	_____	_____	_____
Professional Qualification	_____	_____	_____	_____

15 Employment (please give details of present job first)

Present/Past Employer	Job Title	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

16 Fees

Who will be responsible for payment of your fees? Myself Other

If other, please give details of your funding agency _____

17 English Language Testing

Please indicate your test score below
(if TOEFL, please state whether the test was paper based (PBT), computer based (CBT) or internet based (iBT):

TOEFL: _____ IELTS: _____

Please provide a copy of your English language test score with your application.

18 Computer Information (please tick all applicable responses)

Do you have regular access to the following for study purposes:

Computer: At work At home Other (e.g. Cybercafe) None

Computer facilities: CD Drive DVD Drive

Printer: At work At home Other (e.g. print shop) None

Email: At work At home Other (e.g. Cybercafe) None

Internet browsing: At work At home Other (e.g. Cybercafe) None

Do you use a PC or a Mac? _____ Do you have regular access to a mobile phone? Yes No

19 How did you find out about CeDEP? (please complete all that apply)

Website: _____ Search Engine used: _____

Printed Advertisement (please specify publication): _____

Recommendation by (please tick those that apply):

Work Colleague Professional Contact Former Student Current Student

Other source (please specify): _____ **1001** _____

Your application cannot be considered unless it is accompanied by the following

(please tick as you provide them with this application form)

A Confirmation of your academic qualifications:

UK degrees: photocopy Overseas degrees: original transcript or certified copy of degree

B Copy of statutory document e.g. passport C Passport sized photograph

D Letter giving your reasons for wanting to study with CeDEP

Disabilities

Do you think that you may require special arrangements to enable you study with CeDEP?
(if yes, we will contact you separately) Yes No

Declaration to be signed by student

I declare that the statements made by me on this form are, to the best of my knowledge and belief, true and correct. I am not at present registered as an External, Internal or Short Course Student of the University of London.

Signature: _____

Date: _____

Please return this form to:

The Administrator
CeDEP SOAS
University of London
High Street
Wye, Ashford
Kent TN25 5AH
UK