

APPLICATION FORM

For admissions to the EU Universities, (Please fill in with CAPITAL Letters)

APPLICANT'S DATA

First name (as in passport)		
Last name (as in passport)		
Home Country/Citizenship		
Place of birth (city, country)		
Date of birth (day, month, year)		
Male / Female		
Country of Residence		
Postal/Resident address		
Email		
Phone (Parent or Child)	Mobile	
	Phone (Res)	

EDUCATIONAL BACKGROUND

Name of the Program	Institution & Location	Year of Completion	Subject Names and Grades
1. GCE (O/L) or IGCSE			1. 2. 3. 4. 5. 6. 7. 8.
2. GCE (A/L) or GCE (AS) and AL			1. 2. 3. 4.

Premier Consulting Services FZC LLC Unique World Business Center Wasl Building R364, F2-33 Al Karama, Dubai, UAE <u>customer.first@premierconsulting.ae</u> www.premierconsulting.ae



ENGLISH LANGUAGE PROFICIENCY

language	Native	Excellent	Good	Fair	Poor	Language certificate	Score / Level

REFUND AND CANCELLATION POLICY

- Rejections due to fraudulent documents and misrepresentation of information will not be considered for refund.
- No refunds will be entertained for any change of mind due to any other personal reasons.
- No refunds will be given if the student fails the eligibility interview/examinations.
- A refund will be considered ONLY in the event the application is rejected by the Ministry of Higher Education.
- No Refunds will be considered under any circumstances after the receipt of the approval from the Ministry of Higher education.
- No refunds will be considered due to cancellation or withdrawal due to personal reasons or change of minds after the application process was initiated.

DECLARATION

I hereby certify that all information given in this form is true and correct. I shall not hold the consultant responsible for the information being used for my admission procedure, administrative formalities to any institution/college/university. I also agree to meet all payments to the consultant and the selected institution. I hereby authorize the consultant to act on my behalf to apply for the admission to the agreed universities/institution and do all the needful procedures to secure admissions, including application and correspondence. I hereby confirm that I will not join the same university or institution while this application is under process, directly or indirectly through another consultants/agencies. I also confirm and understood the policies related to Refunds and cancellations.

Date	Signature (Student)	Signature (Parent)			
Document Checklist:					
Passport copy Photo O/L or IGCSE Certificate					
GCE A/L or GCE AS as	nd AL Certificate 📃 English La	anguage certificate			

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University Program Selection Form					
Choice -1					
Country	:				
University	:				
Programme Name	:				
Duration	:				
Tuition Fees	:				
Choice -2					
Country	:				
University	:				
Programme Name	:				
Duration	:				
Tuition Fees	:				
Choice -3					
Country	:				
University	:				
Programme Name	:				
Duration	:				
Tuition Fees	:				
Place:	Counselors Name :				
Date:	Signature :				
I hear by authorize Premier Consulting to initiate necessary consultations on admission and visa					
formalities to the chosen institution/country.					
Name of the student:	Signature:				

For office Use only	
Registration Date:	Invoice No:
Service Fees (USD)	Receipt No:

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