Registration Form

Summer Academy – Alternative Investments

PERSONAL DETAILS		
Last name		
First name		
Occupation		
Nationality/Place of origin _		
Date of birth		
Title		
ADDRESS DETAILS	PERSON TO BE CONTACTED IN CASE OF EMERGENCY	
Address	Name	
	Address	
Zip code/City	Zip code/City	
Country	Country	
E-mail	E-mail	
Phone	Phone	
ARRIVAL DATE	DEPARTURE DATE	
EDUCATIONAL INFORMA	ATION	
Name of university	of university Current level of studies (Bachelor, Master, etc.) Major/specializa	
☐ The university is a bilatera	al partner of the ZHAW School of Management and Law	
invoice for the accommod	nge accommodation for me in Zurich (shared accommodation, e.g. dation will be sent to you along with the acceptance letter. ddress. (You will require accommodation if your commute to the ddress here:	

HOW DID YOU FIND OUT ABOUT THIS PROGRAM? My university Study abroad website ZHAW SML website Friend or family member Online (search engine)	PAYMENT INFORMATION Upon acceptance into the program, students need to submit a EUR 250 non-refundable deposit after notification of acceptance. The deposit will be applied toward the overall program fee.
CONFIRMATION After the receipt of the application, we will review your application and inform you of the admission decision. If your application is accepted, we will send you an invoice for the deposit (EUR 250) and the program fee. The Zurich University of Applied Sciences reserves the right to change the program at any time. Furthermore, the Zurich University of Applied Sciences does not assume responsibility for any changes that are beyond its control.	WITHDRAWAL AND REFUND POLICY Participants wishing to withdraw from the program must notify ZHAW in writing. If written notice of withdrawal is received 31 days or more before the first day of the program, you will receive 100% of the total program cost less the deposit of EUR 250. If written notice of withdrawal is received 30 days or less before the first day of the program, you will not receive a refund. ■ CLOSURES (APPLICATION CHECK LIST) ■ Application form ■ Passport photo
I hereby submit my application and agree to the above- mentioned conditions for participation in the Alternative Investments Summer Academy Program.	☐ A copy of an academic transcript/certificate ☐ Proof of English proficiency, if necessary (min. CEFR Level B2, TOEFL Internet based 61–89 or IELTS 5.0–6.0)
CERTIFICATE OF INSURANCE AND VISA I, the undersigned, confirm that I have arranged medical insurance and that I am fully covered for the duration of my stay in Zurich/Winterthur and in case I need to be repatriated during that time. I, the undersigned, acknowledge that it is my responsibility to provide all necessary travel documents, including visas. I understand that if I am travelling on a non-EEA passport I may require a visa.	SEND TO ZHAW Zurich University of Applied Sciences School of Management and Law Summer Academy P.O. Box 8401 Winterthur Switzerland You may also send your application electronically to summeracademy.sml@zhaw.ch.
Place and date	Signature

The undersigned hereby consents to the use of his/her personal data by the ZHAW School of Management and Law for the purpose of informing him/her about other programs and services. *If you do not wish to give your consent, please cross out this box.*