

Attach ONE
passport size
photo here



LONDON COLLEGE OF MANAGEMENT & INFORMATION TECHNOLOGY

71 Whitechapel High Street, London E1 7PL. United Kingdom
Tel: +44 (0)20 7553 0434 Fax: +44 (0)20 7553 0435 Email: info@lcmmit.com
www.lcmmit.com

APPLICATION FORM

ALL SECTIONS OF THIS FORM MUST BE COMPLETED & SENT WITH:

- Official transcripts from educational institutions attended
- Full Resume / Curriculum vitae
- Two references
- Self-assessment / Autobiography
- One recent passport-size photograph

PLEASE COMPLETE THE FORM IN BLOCK CAPITALS

Courses (please tick the course for which you are applying)

- | | | | |
|--|--------------------------|--|--------------------------|
| English | <input type="checkbox"/> | Masters in Business Administration - Marketing | <input type="checkbox"/> |
| Degree Foundation | <input type="checkbox"/> | - Finance | <input type="checkbox"/> |
| | | - E-commerce | <input type="checkbox"/> |
| MSc/Postgraduate Diploma in Information Technology | <input type="checkbox"/> | MBA/Postgraduate Diploma in Administration | <input type="checkbox"/> |
| MBA/Postgraduate Diploma in Management Studies | <input type="checkbox"/> | | |

Date of proposed enrolment _____

Persons

Title (eg. Mr, Ms) _____ Last Name/Surname _____
Middle Name _____ First Name (s) _____
Permanent Address _____

Zip Code/Postcode _____
Date of birth (dd/mm/yyyy) _____ Nationality _____
Passport No. _____ Marital Status _____
Tel No. (inc. country & area code) _____ Mobile No. (inc. country & area code) _____
Fax No. _____ Email Address _____

Student's Declaration:

I certify that the information contained herein is complete and accurate to the best of my knowledge.

I understand that it is my responsibility to obtain the relevant documentation requested by LCMIT and authorise LCMIT, where necessary, to obtain further information from the appropriate educational institutions.

I understand that this information will be retained on a database for administrative and regulatory purposes.

I understand that LCMIT may use my photo and name for news items, advertising and publicity for LCMIT and its programmes.

I understand that LCMIT reserves the right to change any provision or requirement at any time, even within a student's term of enrolment and that the University further reserves the right to ask any student to withdraw, for any due cause, at any time.

I understand that LCMIT reserves the right to modify its fees, to add or withdraw members from its faculty or administration and to arrange its courses, programmes, and facilities as teaching and economic exigencies render it desirable.

I understand that admission to LCMIT is conditional upon my acceptance and compliance with the rules and regulations of the LCMIT as now established or hereafter revised.

I agree to abide by the rules and regulations of LCMIT.

Applicant's signature _____

Date _____

Notes

- Students must read and understand the declaration.
- The application will not be processed if this form is not signed.
- International students (not based in the UK), Copy of passport page with photo.
- International students (based in the UK), Copy of passport page with photo and copy of a valid UK Residence Permit (student visa).

Please send your application to:

London College of Management and IT

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www.lcmnit.com

Seal of Local Representative

COLLEGE USE ONLY:

Student Ref No. _____

Date Received _____ Approved By _____

Course _____

Signature _____ Date _____

Start _____ End _____

Tuition Fee _____ Deposit _____

Decision _____ Award _____

REMARKS