

APPLICATION FORM

EXECUTIVE MBA 2022 – 2024

FAMILY NAME

GIVEN NAME

SOCIAL SECURITY NUMBER

ADDRESS

TELEPHONE HOME

MOBILE PHONE

TELEPHONE WORK

E-MAIL

MY EMPLOYER'S NAME AND ADDRESS

THE REASON FOR MY APPLICATION

MY PARTICIPATION CAN CONTRIBUTE TO THE EXECUTIVE MBA GROUP IN THE FOLLOWING WAY

MY EXPECTATIONS OF THE PROGRAMME

DATE

PLEASE SEND YOUR APPLICATION TO:

GU Executive Education

Attention: Mr. Peter Salomonsson

P.O. Box 609, SE-405 30 Gothenburg, Sweden

APPLICANT'S SIGNATURE

EMPLOYER'S SIGNATURE