ICMS EARLY ENTRY FORM SECTION 1
APPLICATIONS FOR FEBRUARY 2016 CLOSE ON 28 AUGUST 2015

To be completed by applicant

Personal details:

Family name
Name
Address
Suburb State Postcode
Telephone Date of birth
Email

School

School Name
Address
Suburb State Postcode
Telephone Career Advisor

Course preferences - which programs do you want to study at ICMS?

First course preference:
Second course preference:
Third course preference:

Your Personal Statement:

Please attach to this form a 1000 word statement outlining:

- Why you want a career in your chosen course
- What work or other experience you may have had that make you suitable for this course
- Any extracurricular activities you have been involved in at school
- Anything additional that make you an outstanding applicant for one of our courses

Your year 12 school results

Year 12 Semester 1 Results
Subject Marks Subject Marks Subject Marks Subject Marks Subject Marks Subject Marks

Year 12 trial results
Subject Marks Subject Marks Subject Marks Subject Marks Subject Marks Subject Marks

Declaration

I acknowledge that all the information provided in this application is correct and all sections of the form are complete.

Name

Signature of applicant

Check list

Have you enclosed:  □ Your personal statement  □ Your most recent school reports  □ Has a teacher signed this application?

DATE / /
ICMS EARLY ENTRY FORM SECTION 2

To be completed by your year 12 Advisor, Dean of Studies, Career Advisor or similar

The school recommendation is an important part of the admissions process and is be considered along with the student’s academic results, personal motivation and their performance in an interview. This reference provides important information about the student’s personal qualities and academic capability. Be assured that all information you provide will be held in the strictest of confidence.

Student’s enrolment status

Please indicate the enrolment status of the student: ☐ Local student ☐ Permanent resident ☐ International student

Please attach your reference or recommendation to this application (feel free to leave additional comments below)

Declaration

I declare that this student is academically able and personally suitable to pursue a degree at ICMS and a career in their nominated industry.

Name

Position

Signature of applicant

DATE / /

School stamp

Please place the completed form in a sealed envelope, preferably with the school crest or logo, and return to: Rebecca Wise, International College of Management, Sydney, 151 Darley Road, Manly, NSW 2095 Email: rwise@icms.edu.au