



University of Management and Technology

committed to building futures

Application Form

First Name: _____ Middle Name: _____ Last Name: _____
Mailing Address: _____
Birthday (dd/mm/yy): _____ Sex: _____ E-Mail: _____
Contact Phone: _____ HKID Number: _____

Program applied for

- DBA: Doctor of Business Administration
MBA: Master of Business Administration MPA: Master of Public Administration
BBA: Bachelor of Business Administration
BSCS: Bachelor of Science in Computer Science

Part I. College or University Education

Complete college or university education? Yes _____ No _____

Please check one of levels that you completed Master _____ Bachelor _____ (Yr) Diploma _____

Name of the College or University and Program Title	Duration (mm/yy to mm/yy)	Graduated (yes or no)

Please attach copies of diplomas and official transcripts from each institution listed above

Part II. Professional Certificate/Diploma Education

Name of Professional Organization and Location	Title of Education Program	Duration (mm/yy to mm/yy)	Clock Hours of Study

Please attach a copy of each professional certificate/diploma with study hours indicated on the same or a separate document. Professional certificate/diploma and study hours will not be used to evaluate transferable credits unless evidence is supplied.

Part III. High School Education

Graduated from a high school? Yes ____ No ____

Name of high school and location:

Year of graduation:

Part IV. Work Experience

Name of Organization and Location	Duration (mm/yy to mm/yy)	Position and Title

Attach resume. Please provide organizational letter(s) indicating your work duration, or organizational ID card(s) with your work duration printed on the card(s), as evidence. Work experience will not be evaluated unless evidence is supplied.

Signature of Applicant: _____ Date: _____

Official and Internal Use Only (Office of Admissions at UMT HQ)

High School Education Completed _____

College Transferable Credit Granted _____

Professional Training and Education Transferable Credit Granted _____

Work Experience as Credit Granted _____

Total Transferable Credits Granted _____

Signature: _____

Date: _____