# APPLICATION FORM

***Important Notice:*** *Please download this document before making any edits. Kindly review this form carefully and send it to info@optuniversity-edu.eu*

**Part I: Personal Information**

Directions: Please complete all the required fields on this form.

| | |
|---|---|
| **Formal Photo** | |
| **First Name** | |
| **Middle Name** | |
| **Family Name** | |
| **Identification Card** | |
| **Facebook Link** | |
| **Nationality** | |
| **Home Address** | |
| **City** | |
| **Country** | |
| **Date of Birth** | |
| **Sex** | |

## APPLICATION FORM

| | |
|---|---|
| **Email** | |
| **Current Affiliation** | |
| **Position** | |
| **Bachelor's Degree** | |
| **Institution** | |
| **Date of Graduation** | |
| **Diploma (Certificate)** | |
| **Transcript of Record** | |
| **Master's Degree** | |
| **Institution** | |
| **Date of Graduation** | |
| **Diploma (Certificate)** | |
| **Transcript of Record** | |
| **Doctorate Degree** | |
| **Institution** | |

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| **Date of Graduation** | |
| **Diploma (Certificate)** | |
| **Transcript of Record** | |
| **Other Degree/s** | |
| **Institution** | |
| **Date of Graduation** | |
| **Diploma (Certificate)** | |
| **Transcript of Record** | |
| **Academic and Professional Experiences**<br>(Last 3 years)<br>*Note: You may include more lines.* | —<br>—<br>—<br>—<br>— |
| **Publications**<br>(Last 3 years)<br>*Note: You may include more lines.* | —<br>—<br>—<br>—<br>— |

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| | |
|---|---|
| **Speakerships**<br><br>(Last 3 years)<br><br>*Note: You may include more lines.* | —<br>—<br>—<br>—<br>— |
| **Awards**<br><br>(Last 3 years)<br><br>*Note: You may include more lines.* | —<br>—<br>—<br>—<br>— |

# APPLICATION FORM

**Part II: Course Preference**

| Course Preference | Response |
|---|---|
| What level of study are you enrolling in? (Certificate, Diploma, Associate, Bachelor's, Master's, Doctorate, or Professional Doctorate) | |
| Which program or course would you like to pursue? (refer to Academic Programs and Specializations at https://www.optuniversity-edu.eu/academics/) | |
| Do you have a specific specialization in mind? If so, please specify (refer to Academic Programs and Specializations at https://www.optuniversity-edu.eu/academics/). | |
| What is your preferred study pathway? (Degree by Coursework, Degree by Research, Degree by Accreditation of Prior Experiential Learning - APEL) | |

**Part III: Employment History**

Directions: Kindly submit a comprehensive Curriculum Vitae.

| Employer | Position Held - Title | Brief Description | Completed Dates |
|---|---|---|---|
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**Part IV: Statement of Motivation**

Directions: Kindly submit a comprehensive Statement of Motivation.

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# APPLICATION FORM

**Part V: Declaration**

Directions: Please mark [/] or deselect the relevant boxes and send the completed Application Form along with scanned Transcripts, CV, and any supporting statements or letters to: info@optuniversity-edu.eu

| | |
|---|---|
| I hereby submit my application to enroll as a student at Oceania Polytechnic and Technological University, and I commit to complying with the regulations and fulfilling the necessary fee payments if granted admission. | |
| I hereby confirm that I have thoroughly reviewed and fully accepted the academic and admissions procedures, as well as all applicable university policies, including but not limited to those on Digital Documentation, Gender Equality, Human Rights, Student Retention, Publication Guidelines, and the Privacy Policy. | |

| | |
|---|---|
| Applicant's Signature over Printed Name | |
| Date | |

| **Enclosures** | **Attached (/)** |
|---|---|
| Formal Photo | |
| Curriculum Vitae | |
| Diplomas | |
| Transcripts of Records | |
| Copy of Passport | |
| Student Visa or Special Study Permit | |
| Letter of Recommendation | |
| Research Proposal | |
| **Remarks** | |

**Note:** Additional documents are required for credential transfer, including the following:

| **Enclosures** | **Attached (/)** |
|---|---|
| Student Identification | |
| Course Descriptions & Syllabi | |
| Credit Evaluation Report | |
| Accreditation Proof of Previous Institution | |
| Certification Documents | |
| Work Experience Documentation | |
| Application for Credit Transfer | |
| **Remarks** | |

# APPLICATION FORM

## Part VI: Application for Credit Transfer

**Note:** Please leave this section blank if it does not apply to you.

### A. Courses/Credits for Transfer

| Course Code | Course Title | Credits Earned | Equivalent Course |
|---|---|---|---|
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**Note:** Feel free to add additional rows as needed.

### B. Declaration

I hereby declare that the information provided in this request form is accurate and complete. I understand that the evaluation of transfer credits is subject to the policies of [University Name] and does not guarantee approval of all requested credits.

| | |
|---|---|
| Applicant's Signature over Printed Name | |
| Date | |

**Note:** Please do not write anything below these sections. For Office Use Only.

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## C. Evaluation

| Course Code | Approved Credits Earned | Equivalent Course | Remarks |
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## D. Remarks

| | |
|---|---|
| **Reviewed by:** | |
| **Date of Review:** | |
| **Approved Credits:** | |