



**Distance Learning Programme Application Form 2008**

1001

**FOR OFFICE USE ONLY**

Date received: \_\_\_\_\_ DBase No: \_\_\_\_\_ Ack: \_\_\_\_\_

**APPLICATION FOR REGISTRATION IN 2008**

This form must be returned no later than 31 October 2007 to the address shown overleaf, in order to allow registration to be completed by the start of the study year in February 2008.

**MSc, Postgraduate Diploma and Postgraduate Certificate Courses for External Students**

Please tick the appropriate box

	MSc	Postgraduate Diploma	Postgraduate Certificate		MSc	Postgraduate Diploma	Postgraduate Certificate
Agribusiness for Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Environmental Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agricultural Economics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Managing Rural Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applied Environmental Economics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sustainable Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Biodiversity Conservation & Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

**NB A number of our modules are now provided in electronic format, so access to a computer with CD Rom reader is essential**

**PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS**

**1** Family name \_\_\_\_\_ **6** Address for Correspondence \_\_\_\_\_

**2** First name(s) \_\_\_\_\_

**3** Title: Mr  Mrs  Ms  Other  \_\_\_\_\_ City/Town \_\_\_\_\_ State/County \_\_\_\_\_

**4** Gender: Male  Female  \_\_\_\_\_ Postcode \_\_\_\_\_ Country \_\_\_\_\_

**5** Date of Birth: \_\_\_\_\_ **7** Nationality: \_\_\_\_\_

**8** Work Phone: \_\_\_\_\_ **9** Home Phone: \_\_\_\_\_ **10** Mobile Phone: \_\_\_\_\_

**11** Fax No: \_\_\_\_\_ **12** Work email: \_\_\_\_\_ **13** Home email: \_\_\_\_\_

**14 Academic and Professional Qualifications**

	Name of University/Institution	Title/Subject	Grade/GPA	Date Awarded
First Degree or Diploma				
Postgraduate Degree/Diploma				
Professional Qualification				

**15 Employment (please give details of present job first)**

Present/Past Employer	Job Title	Dates

