F E Y Z İ Y E S C H O O L S F O U N D A T I O N


# IIK UNIVERSITY INSTITUTE OF SOCIAL SCIENCES

APPLICATION FORM

**Program:** Please check the appropriate box/es

Ph.D. in Contemporary Business Studies

Executive MBA

 Thesis Non-Thesis

M.A. in Applied Economics

 Thesis Non-Thesis

M.Sc. in Management Information Systems

M.A. in International Relations

Thesis Non-Thesis

M.A. in Middle East Studies

## Personal Information

ID Number (TC Kimlik Numarası): First Name: Last Name: Place of Birth:

Date of Birth: DD \_MM YY Male Female

Marital Status: Nationality: Current Address:

 Permanent Address:

Phone Number: GSM:

Fax Number (if applicable):

E-mail:

##  Which languages do you speak?

|  |  |  |
| --- | --- | --- |
| Language | Years of Education | Degree of ﬂuency |
| Reading | Writing | Speaking |
|  |  |  |  |  |
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 **Computer Skills:**

|  |  |  |  |
| --- | --- | --- | --- |
| Program | Beginner | Intermediate | Advanced |
| MS Ofﬁce Applications | Word |  |  |  |
| Excel |  |  |  |
| PowerPoint |  |  |  |
| SPSS |  |  |  |
| Other (Please specify): |  |  |  |

 **Standardized test scores:**

|  |  |  |
| --- | --- | --- |
| Test | Score | Date Taken |
| TOEFL |  |  |
| IELTS |  |  |
| ÜDS |  |  |
| KPDS |  |  |
| GMAT |  |  |
| GRE |  |  |
| ALES |  |  |
| KPSS |  |  |

 **Educational Background:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Institution Attended | Dates | Program / Department | Degree Earned / Expected | GPA |
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 **Seminars & Training:**

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| --- | --- | --- | --- | --- |
| Seminar/Course Attended | Topic | Institution | Certiﬁcate | Dates |
|  |  |  |  |  |
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 **Internship and Professional Experience:**

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| --- | --- | --- | --- | --- |
| Company | Department | Position | Dates | Explanation |
|  |  |  |  |  |
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 **Extracurricular Activities:**

|  |  |  |  |
| --- | --- | --- | --- |
| Activity | Degree of Involvement | Achievements or Awards | Dates of Involvements |
|  |  |  |  |
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 Please address shortly why you intend to attend the Graduate Program at Işık University

I hereby certify that all of the above information is correct to the best of my knowledge.

Signature of the Applicant: Date:

Approved By: