

# Seminar Registration Form

Please fill in electronically, then print and sign the form.

Seminar to be attended: \_\_\_\_\_  
Code Title (according to the seminar description available on BSL's Website)

Start of Session: \_\_\_\_\_ Seminar with credits  without credits   
(DD/MM/YYYY)

## 1. Personal Information and Contact Details

First Name	Middle Name	Family Name
Gender: <input type="radio"/> Male <input type="radio"/> Female	Mr./Mrs./Ms.: _____	Date of Birth: _____
Mailing Address: _____		Post Code & City: _____
Telephone: _____	Country: _____	
Mobile Number: _____	Email: _____	

## 2. English Level

Mother tongue  Excellent  Good  Fair

## 3. Education (List the highest degree or qualification obtained)

Degree or qualification	obtained(year)	by (Institution and location)
_____	_____	_____
_____	_____	_____

## 4. Professional Program (Have you previously attended a professional training? List the three most relevant or recent ones)

Program type	When? (year)	Duration	by (Institution and location)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## 5. Work Experience (Please mention your most recent positions starting with the current one)

Company name	Industry sector	Position	Dates (MM-YY / MM-YY)
_____	_____	_____	_____
_____	_____	_____	_____

## 6. Enclosures Required

- Your Curriculum Vitae/resume
- A passport photograph (digital or in print)

**7. How did you hear about BSL?** (Please indicate the source)

Fair: \_\_\_\_\_ Internet: \_\_\_\_\_  
School rankings: \_\_\_\_\_ Social media: \_\_\_\_\_  
Press article: \_\_\_\_\_ Print advertising: \_\_\_\_\_  
Friend/Family/Colleague: \_\_\_\_\_ BSL faculty: \_\_\_\_\_  
Agent: \_\_\_\_\_ High school (counselor/event): \_\_\_\_\_  
Other institutions/organizations: \_\_\_\_\_  
Career advisor/Employer: \_\_\_\_\_  
Event/Conference: \_\_\_\_\_  
From a BSL former/current student: \_\_\_\_\_

**8. Registration Process**

Our Admission Office will evaluate your registration file to make sure that your profile corresponds to the program pre-requisites. This evaluation process may take up to two weeks. If you are eligible for the program, we will send you a course pre-reservation. Once we receive payment, we send you a reservation confirmation plus additional details regarding course preparation and pre-reading material.

**9. Seminar Fee & Payment**

The fee for the seminar is CHF 2'800.—. This includes course hand-out material but not books which may need to be purchased separately (approx. CHF 100.-- per course). Participants are responsible for their own travel costs and accommodation expenses.

In order to secure a place in a given course or program, payment needs to be made, at your earliest convenience but at least two weeks prior to course start, in favor of BSL, Lausanne, IBAN CH80 0076 7000 K090 7585 6 with Banque Cantonale Vaudoise, swift code BCVLCH2LXXX.

**10. Name and Address for Invoices** Tick if same as contact details

Please indicate to whose name the invoice for the program fees should be addressed:

Name of Company: \_\_\_\_\_  
Family Name Dr./Mr./Mrs./Ms.: \_\_\_\_\_ First Name: \_\_\_\_\_  
Mailing address: \_\_\_\_\_ Post Code: \_\_\_\_\_  
City: \_\_\_\_\_ Country: \_\_\_\_\_  
Main Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**11. Cancellation Procedure**

If BSL has confirmed the course pre-reservation and the participant has paid the fees but subsequently wishes to cancel, BSL has to be notified of this decision in writing

- a) In the event of a cancellation 30 days or more prior to program start, the participant is reimbursed 50% of the paid fee.
- b) Cancellation or withdrawal from the seminar is not entitled to any refund.

**12. Seminar Confirmation**

BSL confirms 21 days before seminar start, that the program takes place. In case of cancellation by BSL, the full fee is reimbursed to the participant.

I, \_\_\_\_\_, hereby certify that I have read and understood the registration process, the payment terms, the cancellation procedure and sign in acceptance of these conditions. I also confirm that the information entered by myself on the application form is correct.

First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_  
Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

**Business School Lausanne**  
Office of Admissions  
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1022 Chavannes, Switzerland

