

Leading Innovative Teams – Executive Program

Application Form

Fields with asterisks * are required for submission. If you need assistance completing this form, please contact us at 2528 9701

GENERAL INFORMATION

*Prefix:	*Last Name:						
*First Name:	*Middle Name:						
*Sex: 🗆 Male 🛛 Female *Da	ate of Birth: (D) / (M) /(Y)	*Nationality	:			
Tel: *O	Office:		*Mobile:				
*Address:							
*City: *State/Province	:	*Country:		*Zip:			
*Email:							
Your contact information, including name, tel nos. and email, will be shared with other participants unless you indicate otherwise below:							
Please do not share my address with other participants.							
\Box Please do not share my phone no(s) with other participants.							
Please do not share my email with other participants.							
Education							
*Highest level of education attained:	High School	🗆 BS/BA	ID/Law	\Box M.D.			
	2-Year College	□ MS/MA	🗆 PhD	Foreign Diploma			
*School awarding degree or diploma above:							
*Major:	*Year degree or diploma conferred						
*Please list any university executive programs you have attended.							
Work Experience							
*Number of years of full-time work ex	perience: 🗌	7 or less 🛛	8-14	15-20 🗌 20+			
*Number of years of management exp	perience:	5 or less 🛛	6-14	15-20 🗌 20+			
*Please indicate your proficiency in the following areas of management (1=high, 2=some, 3=little)							
□ Accounting		Information Te	echnology				
Marketing and Sales	ales Deople Management						
□ Finance	Managing Change						
Operations	Strategic Management						



ORGANIZATION / COMPANY INFORMATION

*Organization/Company:

*Job	*Job Title: *Company Website:						
Company Address:							
*Indu	ustry Group:						
	Agriculture, Forestry		Construction		Finance/Insurance/Real Estate		
	Mining		Public Administration		Retail Trade		
	Services		Transportation & Utilities \Box		Wholesale Trade		
	Other						
*Job	Function:						
	Accounting		Administration		Business Development		
	Consulting		Customer Service		Engineering		
	Finance		General Management		Human Resources		
	Information Technology		Legal		Logistics and Distribution		
	Marketing		Operations		Public Relations		
	Purchasing		Research & Development		Sales		
	Strategic Planning		Transportation		Other		
*Mai	nagement Level:						
	Top (e.g. CEO, COO, CFO)		Senior (e.g. Vice President, SVP)		Middle (e.g. Director, Manager)		
*To v	vhat unit in the organization do you	report	? 🗆 Co	rporate	🗆 Group 🗌 Division		
*Number of employees who report to you and your direct reports?		vour direct reports? 🛛 <10	0	□ 10-49 □ 50-99			
				0-999	□ 1000+		
*Describe the unit for which you are responsible and your current responsibilities.							
*Are you a company-sponsored participant? Yes, I am fully / partially sponsored by my company.							
Contact person of HR/Training Dept:Tel:							
			Email:				
No, I am self-funded							
*Plea	se indicate how you first heard about	_	-	_			
	Email Notification		Linkedin		Direct Mail		
	CEG website		Ad/Article in publication		Facebook		
	Recommended by employer		CEG student		Other Referral Source		
	Internet Search (which search engi	ne:)				



APPLICATION, ADMISSION, PAYMENT AND CANCELLATION POLICIES

Enrolment:

To enroll for the MIT Executive Program, please submit the follow documents:

- 1) Completed Application form
- 2) Latest CV
- 3) Business Card
- 4) Tuition fee HK\$44,460* (US\$5,700) Cheque in favor of "China Education (EE) Ltd"

OR Bank/Wired Transfer to:

Name of Bank: HSBC Account Number: 400-475224-838 Account Name: China Education (EE) Ltd. Bank Address: 1 Queen's Road Central, Central District, Hong Kong Swift Code: HSBCHKHHHKH

Submit the application in person or by post to:

CEG - MIT Executive Program Room 1804, 18/F., Tower 1, Admiralty Center, 18 Harcourt Road, Admiralty, Hong Kong Attn: Edmond Yim

Admissions:

Applicants must be proficient in English. All classes and discussions are conducted in English. It is understood that during attendance at the program, the participant will be free of other duties and will not leave except in emergency situations. MIT University reserves the right to use photos taken during seminar activities for promotional and educational purposes. Self identification of gender and birth is entirely voluntary.

Payment:

Payment is due upon receipt of invoice. Please make cheques payable to **China Education (EE) Limited** OR bank-in your tuition payment (in HKD) to our **HSBC 400-475224-838** and fax the receipt to (852) 2537 0549. Places will not be guaranteed until payment is received.

Cancellations:

Because attendance at MIT Leading Innovative Team Program requires advance preparation and demand often exceeds capacity, it is important that you contact us in a timely manner if you must cancel or defer your attendance. To receive a full refund of tuition, notice of cancellation must be received more than 30 days in advance of the program start date. Participants who cancel less than 30 days in advance will not receive a refund but may nominate an acceptable substitute or attend a future session of the same program within one year.

Photo Rights:

We reserve the right to use photos or video footage taken during the program activities for promotional purposes.

 \Box I have read and understand the admissions, payment, and cancellation policies.

*Signature:

Date: