

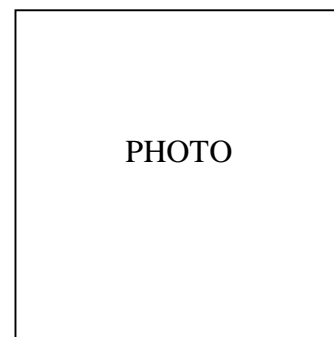
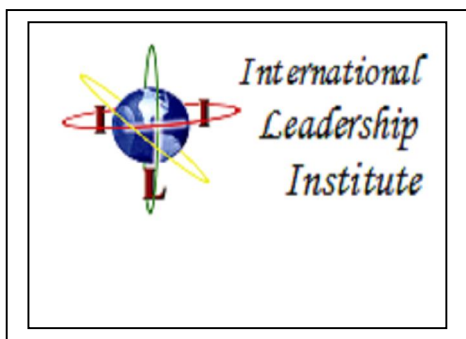


**Application for PhD and Doctoral Program  
International Leadership Institute in Collaboration with Bulacan State  
University**

***Application Checklist***

**Items required by the Office of Admission for Completed Application:**

- ✓ **CV**
- ✓ **Expression of interest in less than 1000 words**
- ✓ **Copy of Masters Diploma/Degree with Original**
- ✓ **Transcript Copy**
- ✓ **Official Transcript from previously attended University**
- ✓ **Two Passport Size Photos**
- ✓ **Application Fee of \$150.00**
- ✓ **Passport/National ID Copy**



International Leadership Institute  
*In Collaboration with*  
The Bulacan State University

Fill in the Space and/or make a **tick mark** in the appropriate box:

- ☐ Doctors in Public Administration  
☐ PhD in Business Administration

***Please print or type.***

1. Name \_\_\_\_\_  
First Name Father Name Grand Father Name
2. Address: Kebele: \_\_\_\_\_ Woreda: \_\_\_\_\_ House # \_\_\_\_\_  
Town: \_\_\_\_\_ Region: \_\_\_\_\_ Country: \_\_\_\_\_  
P. O. Box # \_\_\_\_\_
3. Home phone \_\_\_\_\_ ( Home ) \_\_\_\_\_ (Office)  
\_\_\_\_\_ (Mobile) \_\_\_\_\_ (Email)
4. Sex Male ☐ Female ☐
5. Date of Birth: \_\_\_\_\_  
Day Month Year
6. Place of Birth: \_\_\_\_\_
7. Nationality: \_\_\_\_\_
8. Marital Status: Single ☐ Married ☐ Divorced ☐ Widowed ☐

9. Contact person in case of Emergency (Include address and Phone Number)

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10. Present Occupation: \_\_\_\_\_

11. Name and Address of the Employer:

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12. Educational Background

School	Name	Location	Year attended From ____ to ____	Award in
BA (BSc)				
MA postgraduate				

13. References (Please give three references with phone numbers)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

15. Beginning Term (Please circle One)

☐ Fall I (November 2010)

☐ Spring I (April 2011)

The above information is true.

Signature: \_\_\_\_\_ Today's date: \_\_\_\_\_

**For Official Use Only**

To be completed by the Screening team

The above student has submitted all required information and I recommend

- ☐ To be Admitted
- ☐ Not to be admitted at the present time
- ☐ To be granted conditional enrollment

Signatures:

1. \_\_\_\_\_ Date: \_\_\_\_\_

2. \_\_\_\_\_ Date: \_\_\_\_\_

3. \_\_\_\_\_ Date: \_\_\_\_\_

# Financial Form

Name of Student: \_\_\_\_\_

Sponsored By

- ☐ Personal (self Sponsored)  
☐ Sponsorship (please provide letter to guarantee)  
☐ Not sure now (Will indicate in the future)

Sponsoring Government Organization \_\_\_\_\_

Person of Contact: \_\_\_\_\_

Phone number: \_\_\_\_\_

Sponsored by other organization

Other Sponsoring Organization: \_\_\_\_\_

Person of Contact: \_\_\_\_\_

Phone number: \_\_\_\_\_

once admission is approved, students will be required to provide sponsorship letters from their sponsors

## Official Use Finance Office at ILI

Sponsorship letter received and/or Financial guarantee approved:

Approved By \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_