

MGSM POSTGRADUATE AND MBA PROGRAMS HONG KONG APPLICATION FOR ADMISSION

Applications must be lodged by the closing date in accordance with the instructions on the back page of the form. Applications by fax or email will not be accepted.

All questions must be completed and incomplete applications will delay assessment.

OTHER CONTACT DETAILS (MANDATORY)

PERSONAL DETAILS

01	\square Mr \square Mrs \square	Miss □ Ms □ Dr □ Other	0.5	F I	
	Family Name or	Surname	03	Email	
	5				
	First Given Name			Mobile	
	Other Given Nar	nes		Home Telephone ()	
	Preferred Given	Name		Work Telephone	
	Previous or Form	ner Surnames			
02	Date of Birth (dd	l/mm/yy)		Facsimile (L) L	
	Sex: □ Male	☐ Female	06	Organisation	
	CONTACT AT	DDRESS DURING TERM		Position	
		for all correspondence)		Industry	
03	Address		07	Have you previously applied to or b	peen enrolled as a student at
				Macquarie University?	
				□ Yes □ No	
				If yes, indicate year(s) of enrolment	and student number (whether or
				not you proceeded with the progra	amme).
	Country			Programme	
	PERMANENT HOME RESIDENCE ADDRESS This must not be a PO Box address. For Temporary residents and			Years Applied/Enrolled	
	International stud	ents, this must be a non-Australian residential address.		Student Number	
04	Address Address			PROGRAM CHOICE	
			08	Please indicate which programme you are applying for by placing	
				a tick (\checkmark) next to the relevant option. (Please tick one option only)	
				☐ Master of Business Administration (MBA)	
				☐ Graduate Diploma of Management	
	Country			☐ Graduate Certificate of Manag	gement

09	Please indicate the intake and year for which you are applying:		☐ Australian Citizen (including Australian Citizen with dual citizenship – provide a copy of passport/Australian Citizenship
	☐ Term 1 (January) Year		Certificate and bring the original document to the induction seminar for authorisation).
	☐ Term 3 (June) Year		If yes, are you an Australian Aboriginal or a Torres Strait Islander?
10	If your application is unsuccessful, would you like to be		□No
	considered for a place in an alternative program?		☐ Yes, Australian Aboriginal
	☐ Yes ☐ No		☐ Yes, Torres Strait Islander
	NEXT OF KIN OR EMERGENCY CONTACT DETAILS		\square Yes, Australian Aboriginal & Torres Strait Islander
11	Full Name Home Address		□ New Zealand citizen or a diplomatic representative of New Zealand, a member of the staff of such a representative, or the spouse or dependant relative of such a representative, excluding those with Australian citizenship.
			(Note: Includes any such persons who have Permanent Residency status of Australia – provide a copy of passport and bring the original document to the induction seminar for authorisation)
	Country		☐ Permanent Australian Resident (not Australian or New Zealand Citizen – provide a copy of all documentation and bring the original document to the induction seminar for authorisation)
	Home Telephone ()		If yes, are you the holder of an Australian Permanent Resident Humanitarian Visa?
	Work Telephone ()		□No
			□ Yes
	Mobile		Year residency was granted (dd/mm/yy)
	Relationship to applicant (please tick (🗸) one option)		Very of arrival in Australia (dd (non (n.))
	□ Parent □ Spouse		Year of arrival in Australia (dd/mm/yy)
	□ Partner □ Brother/Sister		☐ Citizen of country other than Australia or New Zealand or
			Hong Kong (provide a copy of all documentation and bring the original document to the induction seminar for authorisation)
	□ Son/Daughter □ Other Relative		
	☐ Other (please specify)		Of which country are you a citizen?
		13	Country of birth
			Main language and the state of
	RESIDENTIAL STATUS		Main language spoken at permanent residential address.
12	What is your official residential status? (please tick (🗸) one option)		
	☐ Hong Kong Citizen		2.46-0-2-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-
	HKID Card/Passport Number		PLACE OF RESIDENCE
		14	Please provide details of your residence (if different to the address details provided previously).
	Name in the order it appears on the HKID Card/Passport		Home Address
	(Please provide a copy of HKID card and bring the original document to the induction seminar for authorisation)		
			Country
			Telephone ()

ENGLISH LANGUAGE PROFICIENCY Have you completed a qualification where the primary language of instruction was English? **15** Applicants who have not undertaken recognised studies ☐ Yes, state the qualification and institution: taught in English (e.g. undergraduate degree) are required to demonstrate proficiency in English. The required scores for English Academic Tests are: • IELTS Academic (General tests not accepted) – ☐ No, have you undertaken an English language test? Overall 7.0, with minimum scores of 6.0 in all components □ No • TOEFL (Paper) – Overall 600, with minimum scores of Listening 53, Writing 59, Reading 52 and Essay Writing 4.5 **English Test Name** • TOEE(Internet) – Overall 100, with Speaking 18, Listening 12, Structure/Writing 21, and Reading 13. Date Test Taken Result (if known) * Please attach a copy of your result and bring the original certificates to the induction seminar for authorisation. ORIGINAL SOURCE OF INFORMATION Have you attended an Information Session? **16** Please indicate where you first heard about MGSM's programmes: Have you attended a Personal Consultation? ☐ Direct Mail ☐ TradeShow/Exhibition ☐ Yes □ No Did you apply to MGSM as a result of a referral? ☐ HKMA Email ☐ Search Engine \square No ☐ Display at HKMA Centre ☐ Word of Mouth If yes, was the referral one of the following: ☐ Website Advertisement (please specify) ☐ MGSM Current Student ☐ MGSM Alumni □ Colleague ☐ Other (please specify) ☐ Mobile Advertisement (please specify) Referrer's Name ☐ Newspaper/Magazine (please specify) ☐ MGSM Website ☐ HKMA Website ☐ Social Media (please specify) **ACADEMIC OUALIFICATIONS** YEAR OF NAME OF INSTITUTION **COURSE UNDERTAKEN AND QUALIFICATION GAINED** 17 Please provide details AND LOCATION (INCLUDING CLASS OF HONOURS, WHERE RELEVANT) GRADUATION of your academic qualifications. HIGHEST QUALIFICATION **ACHIEVED** PROFESSIONAL QUALIFICATION

A copy of an academic transcript of results from each institution attended (including Macquarie Students who have undertaken studies elsewhere) must be submitted with this application. If the transcript is in a former name, evidence of change of name must be submitted. Documents not in English must be accompanied with certified translations. Please not that any original documents will not be returned. Please attached two full sets of photocopies of certificates and transcripts of education qualifications detailed above. All participants must bring the original documents of their education qualifications to the induction seminar for authorisation.

OTHERS

ADVANCED STANDING

	Advanced Standing is only considered for CORE units of the MGSM programme for which you are applying. Are you seeking advanced tanding or exemptions for previous tertiary studies or as a result of your membership with a professional association e.g. CPA?*							
	□No							
	☐ Yes Please download and complete the Application for Advanced Standing available at www.mgsm.edu.au/pgdownloads New applicants must apply for advanced standing at the time of application.							
9	SUMMARY OF WORK EXPERIENCE							
(Current position held:							
	ndustry:							
	e provide a clear outline of you; budgetary authorities; and re		rk history, ensuring that you provide details su	ich as: the number of staff reporting				
	PERIOD OF EMPLOYMENT (START WITH MOST RECENT)	POSITION	NAME AND NATURE OF ORGANISATION	OUTLINE YOUR KEY ACTIVITIES (IN POINT FORM)				
	From							
	То							
	From							
	То							
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	From							
	То							

In addition to completing the above table, please attach your résumé/CV (maximum of 5 pages).

Total years of managerial/professional experience

20 Please indicate the number of years you have had experience in each of the following areas. **ACTIVITY** NUMBER PLEASE GIVE A BRIEF EXAMPLE **OF YEARS** Strategic decision making (e.g. own business, senior management, etc) Responsibility for managing or supervising staff (indicate number of staff managed/supervised) Controlling or being responsible for budgets Responsibility for overseeing a functional area (e.g. finance, marketing, etc) Responsibility for project design and implementation Preparing reports and submissions Responsibility for achieving results (e.g. sales targets, etc) **SPONSORSHIP** 21 Is your employer providing you with financial support? □ No ☐ Yes, please indicate level of financial support: ☐ Full-sponsorship (100%) ☐ Part-sponsorship STATEMENT OF PERSONAL AIMS AND ACHIEVEMENTS (COMPULSORY) 22 Please ensure the statement of aims and achievements, including details of your career achievements to date and your professional ambitions, is completed and attached. This statement provides an opportunity to expand on the information already provided. REFEREE REPORTS (COMPULSORY) 23 Applicants are required to obtain two referee reports to provide information about the applicant's work history. Referees should be chosen carefully on the basis of their direct knowledge of your potential managerial capability. Family members should only be used if they have a direct work connection. Referees are asked to return their reports to the applicant in an envelope, signed across the seal to ensure confidentiality before the deadline for application. Please list the name and contact number for each referee below.

Please ensure referees are aware of the closing date for applications as your application CANNOT proceed without receipt of all referee reports. Please note references will only be accepted on current MGSM referee forms. No other format is acceptable.

Telephone (

Telephone (

PASSPORT PHOTOGRAPHS

1 Referee

2 Referee

24 Please attach a small envelope with two passport size photographs of yourself with your name on the back.

PRIVACY NOTIFICATION

I wish to be considered for enrolment in the specified programme at Macquarie Graduate School of Management ("MGSM"), as part of Macquarie University ("the University").

The information provided on this form is "personal information" as defined by the Privacy and Personal Information Act 1998 (NSW) (the "PPIP Act"). I understand that upon my registration in the programme, the information will become part of my student record and may be used and processed for all lawful purposes relating to my academic activities in accordance with the established privacy policy of The Hong Kong Management Association (HKMA), MGSM (a copy of the MGSM privacy policy can be found at http://www.mgsm.edu.au/privacy-policy) and/or the University, and in accordance with the PPIP Act, the Australian federal Privacy Act 1988 (Cth) and the Hong Kong Personal Data (Privacy) Ordinance (Cap. 486) (the "HK Privacy Ordinance"). I shall comply with the HKMA Privacy Policy Statement (a copy of which can be found at http://www.hkma.org.hk/privacy-en.htm) and other related regulations in force from time to time.

I understand that the collection of the information on this form will be used for the purpose of assessing my application to the programme and for this purpose I consent to and authorise HKMA, MGSM and/or the University to carry out checks on my academic status, including but not limited to, multiple admission applications and records of previous studies, and to obtain and the relevant authority to release, official records from any university or other tertiary institution previously attended by me.

I consent that the information on this form may be used by MGSM, HKMA and/or the University for their respective administrative, academic, research, statistical and alumni activities and any prescribed purposes allowed by applicable law and in relation to the University and MGSM, for any of the purposes described in the applicable privacy collection notice at the University's website (a copy of which can be found at privacy collection notices – http://www.mq.edu.au/about_us/how_mq_works/privacy/collections_notices/).

I also consent to HKMA, MGSM and/or the University contacting me regarding any seminars or education or training programmes or management services they offer from time to time. However, I understand that I can opt-out of receiving such material by ticking the box below or at any other time by contacting any of those institutions at the contact details below.

I consent to the disclosure of my personal information to:

- MGSM staff, University staff and HKMA staff;
- data service providers engaged by MGSM, HKMA and/or the University from time to time, my employer organisations and/or referees, and any other body which forms part of MGSM, HKMA and/or the University in circumstances when such disclosure is deemed necessary to further my application or admission into the programme;
- any other overseas partners and/or education partners who require the information for administrative purposes in connection with my application or admission into the programme; and
- in relation to the University and MGSM, to any of the bodies listed in the applicable privacy collection notice at the University's website (a copy of which can be found at privacy collection notices http://www.mq.edu.au/about_us/how_mq_works/privacy/collections_notices/).

I understand that the provision of the information is voluntary but if this information is not provided, MGSM and HKMA and/or the University may be unable to process my application for admission or to conduct further correspondence. I understand that I have a right of access to and correction of my personal information in accordance with the PPIP Act, the Privacy Act and the HK Privacy Ordinance. I understand that I can request access to or correction of my personal information by contacting MGSM, the University or HKMA as follows: HKMA – viviancheng@hkma.org.hk; MGSM – info@mgsm.edu.au; or Macquarie University - privacyofficer@mq.edu.au.

The information is being collected by each of MGSM, the University and HKMA and will be held by MGSM, the University and HKMA.

I declare that the information provided in support of this application is to the best of my knowledge true, accurate and complete. I understand that the information will be used in the admission assessment process and that MGSM, HKMA and/or the University may disqualify my application for admission and enrolment in the programme, or vary or reverse any decision made on the basis of incorrect, incomplete or misleading information.

☐ I do not wish to re institutions from	eceive information from MGSM, Macquarie University or HKMA regarding any seminars on time to time.	education or training programmes or management services offered by any of those
Signature		Date/

CHECKLIST

- \square All parts of the application form have been completed
- ☐ Ensure the following documents are included with your application:
 - Two sets of photocopies of all certificates of education qualifications including academic transcripts
 - Résumé/CV
 - Details of your nominated referees
 - Statement of personal aims and achievements
 - Two referee reports
 - Two passport size photographs
 - Application Fee of HKD250.00 in the form of a cheque made payable to the Hong Kong Management Association
- ☐ Ensure the following documents (where applicable) are included with your application:
 - Copies of documentation showing residential status or copies of visa or passport
 - Documentation showing change of name
 - Proof of proficiency in English
 - Advanced standing form and related information
- $\hfill\Box$ Ensure that referees are aware of the closing date for applications as your application **CANNOT** proceed without receipt of all referee reports
- ☐ Send the original application addressed to The Local MGSM Secretariat

Please ensure all questions are answered and all documentation is attached as incomplete applications will delay assessment.

Please note all documents submitted become the property of MGSM and will not be returned.

APPLICATION LODGEMENT

By mail to:

The Local MGSM Secretariat c/o The Hong Kong Management Association

Tower B, Southmark 11 Yip Hing Street Wong Chuk Hang HONG KONG

In person at any HKMA centre.

Further Information

The Hong Kong Management Association
Telephone: +852 2774 8585/2774 8527

Facsimile: +852 2365 1000

Email: degree.mgsm@hkma.org.hk Web: www.hkma.org.hk/mgsm



MGSM POSTGRADUATE AND MBA PROGRAMS HONG KONG STATEMENT OF PERSONAL AIMS AND ACHIEVEMENTS

APPLICANT DETAILS

Family Name or Surname
Given Names
Name of Postgraduate Programme Applied For
Please expand on your achievements to date and your professional ambitions.





REFEREE REPORT CONFIDENTIAL

APPLICANT DETAILS	NOTE TO REFEREE
Family Name or Surname Given Names	The applicant mentioned has applied for admission to a program at Macquarie Graduate School of Management (MGSM)
Telephone ()	and has nominated you as a referee.
Email	The purpose of this MGSM program is to provide an opportunity for students to
REFEREE DETAILS	develop knowledge, abilities, attitudes
Name of Referee	and understanding which will constitute a foundation for their growth into competent
Position	and responsible managers. It would assist the School if you would provide your assessment
Organisation	of the applicant.
Address	This report asks for information that the School finds useful in assessing the
Telephone ()	applicant's ability to successfully complete the program. The form is provided for your
Email	convenience and allows for the relevant information to be supplied in the necessary structure. Any information you provide will
How long have you known the applicant?	be considered strictly confidential.
	We are aware that we are asking for considerable time and effort on your part
What is your work connection with the applicant?	in completing this form. However, far more applications are received than there are
	places available and it is necessary to select carefully those applicants to be admitted. Your assistance in giving this appraisal is very
	helpful to us and greatly appreciated.
For what type of management position would you see the applicant long run (for example, would you see the applicant's future as a line officer, adviser or specialist)?	
	PLEASE RETURN YOUR REPORT TO THE APPLICANT IN AN ENVELOPE SIGNED

ACROSS THE SEAL TO ENSURE CONFIDENTIALITY, BEFORE THE DEADLINE FOR APPLICATION.

Please rate the applicant on the following characteristics (tick (appropriate box). Use what you consider to be general managerial ability as a base for comparison.	VERY POOR LOWEST 10%	POOR NEXT25%	AVERAGE NEXT 30%	GOOD NEXT 25%	EXCELLENT TOP 10%	COMMENT		
Drive to succeed								
Self discipline								
Ability to work with others								
Initiative								
Senior executive potential								
Verbal skills								
Writing skills								
Analytical skills								
What are the applicant's outstanding	strengths?							
What are the key areas in which the a	applicant w	ould benefi	it from deve	elonment?				
	19							
Do you have any comments about the	ne applican	t undertakir	ng a demar	naing postgi	raduate pro	gram in respect to his/her:		
1. Motivation								
2. Aptitude to study								
3. Time Management								
Signature of Referee						Date: / / / /		