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| **Master in Applied Research**  **in Economics and Business**  **Facultat d’Economia i Empresa**  Edifici B  Universitat Autònoma de Barcelona  08193 Bellaterra (Cerdanyola del Vallès)  Barcelona, Spain  e-mail: master.mareb@uab.cat |  |

**ACADEMIC YEAR 2024/25**

**MASTER IN APPLIED RESEARCH IN ECONOMICS AND BUSINESS (MAREB)**

**APPLICATION FOR ADMISSION**

**Please fill in this application form completely, with the only exception of the final section titled ‘for internal use’.**

**MAREB has two specialization options: Applied Economics and Entrepreneurship. Please indicate which one are you interested in following:**

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| **Applied Economics** |  |
| **Entrepreneurship** |  |
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| **A. PERSONAL INFORMATION** | | | | | | |
| **Surname / Family name** | | | **Name** | | | |
| **Date of birth :** day    month       year | | | | | **Gender** M  F | |
| **Country of birth** | | | | **Nationality** | | |
| **Country of residence** | | | | **ID/passport number** | | |
| **Contact address during the master courses** | | | | | | |
| **Telephone** | | | | | | **Fax** |
| **e-mail** | | | | | | |

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| **B. EDUCATION** | | | | | | | |
| **Undergraduate and postgraduate studies:** | | | | | | | |
| University | Studies/degree: | | Started: | | | Completed: | |
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| Please provide details about any pending exam or studies that will be completed by September 2020: | | | | | | | |
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| **C. ACADEMIC REFERENCES** | | | | | | | |
| Please provide details about two professors to whom you have asked to send recommendation letters supporting your application (the letters should be sent by them to the master’s coordinator)  **1st reference: 2nd reference:** | | | | | | | |
| **Name:** | | | | | **Name:** | | |
| **Position:** | | | | | **Position:** | | |
| **Department and University:** | | | | | **Department and University:** | | |
| **e-mail:** | | | | | **e-mail:** | | |
|  | | | | | | | |
| **D. PAYMENT OF FEES AND STAY AT UAB** | | | | | | | |
| Please tick the option that best describes how you plan to pay for your studies and stay at UAB:  1. Own finances  2. Current employer  3. Scholarships and grants. → Please provide the following details: | | | | | | | |
| Scholarship or grant name and type: | | | | | | | |
| Awarding institution: | | | | | | | |
| Have you applied for the scholarship? | | | | Yes  No: | | | |
| Has the scholarship been awarded? | | | | Yes  No:  → Expected date of award: | | | |
|  | | | | | | | |
| **E. DETAILS OF PERSON TO CONTACT IN CASE OF EMERGENCY.** | | | | | | | |
| Please provide contact details of who should be contacted in case of emergency | | | | | | | |
| **Name and Surname** | |  | | | | | |
| **e-mail** | |  | | | | | |
| **Telephone (include international code)** | |  | | | | | |
| **Address** | | | | | | | |
| Name                                                            Date | | | | | | | |