

## 1. About the Applicant

Family Name \_\_\_\_\_ First Name \_\_\_\_\_

Male  Female

Nationality \_\_\_\_\_

Date of Birth **DD MM YYYY**

Marital Status  Single  Married

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_  
(including country code) (including country code)

Email \_\_\_\_\_ Alternate Email \_\_\_\_\_

## 2. Education

Name of High School / College / University \_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_

Highest Qualification \_\_\_\_\_ Completion Date **MM YYYY**

Type of School  Private  Public / State  International

## 3. English Language Level

Mother Tongue \_\_\_\_\_

To apply for a Glion program, applicants are required to demonstrate proficiency in the English language (knowledge of English), and you may do so by meeting any one of the criteria listed below:

- English is my mother tongue
- For the last three years, I have been studying in a school where English is the primary language of instruction
- I can provide an official test score and supporting documentation:
- IELTS Score \_\_\_\_\_  TOEFL Score \_\_\_\_\_
- Cambridge First Certificate Score \_\_\_\_\_  Cambridge Advanced Score \_\_\_\_\_
- Name of other Provider \_\_\_\_\_ Score \_\_\_\_\_

## 4. Academic Program

Please select the program you wish to enroll on:

- BBA in International Hospitality Business** (3.5 years – two internships included)  
(Optional: Applicants will select a specialization in Semester 6. Global exchange semesters are available – more details provided once on campus.)
- MSc in International Hospitality Business** (1.5 years – internship included)  Hospitality Immersion Program (4 weeks)  
(Pre-sessional program)
- Dual MBA and MSc in International Hospitality Business** (2 years – one full year on the job included)  
(This program is in partnership with GEM Grenoble École de Management in Glion, Switzerland.)
- Intensive Hospitality and English Language Program (IHELP) – One semester of English** (15 weeks in London)  
(Students study for fifteen weeks at Glion London campus prior to the start of the BBA or the MSc)
- Intensive Hospitality and English Language Program (IHELP) – Pre-sessional English** (6 weeks)  
(Students study for six weeks at Glion Switzerland campus prior to the start of Semester 1 of the BBA or the MSc)

Please indicate the month and year you wish to start:  Feb. **YYYY**  Sept. **YYYY**

(Dual Master program applicants may only select 'Sept.' as this program has one intake per year)

## 5. Room and Board

All students will have a prepaid Food and Beverage card included in the tuition fees (except for the IHELP 15 in London).

Please refer to the Tuition and Other Fees for details.

Please indicate your preferred accommodation for semester 1 - subject to availability (except for the IHELP 15 in London):

Glion has the following room options available. You will have the opportunity to confirm your preference once you are officially accepted and have paid the required deposit. All room options are subject to availability at the time of your payment.

- Double Superior Room – En-suite bathroom (by default)
- A\* – Single Room – Shared bathroom (only available on Glion campus, not in Bulle)
- B\* – Single Superior Room – En-suite bathroom

\*Room categories A and B are available on a first-paid- first served basis for an additional fee. For further details, please refer to the Tuition & Other Fees form.

For MSc students only:

MSc students have the option to stay off campus and/or have their meals off campus. Please indicate below if this is your preferred option

- No accommodation  No prepaid Food and Beverage card

For IHELP 15 students only - I want accomodation on campus:  Yes  No

## 6. Professional Experience

Do you have professional working experience in a hospitality-related field?  Yes (please provide details in your CV)  No

## 7. Medical History

Do any of the below conditions apply to you? No Yes (please provide details)

Any learning differences:   \_\_\_\_\_  
(e.g. dyslexia, dyscalculia, ADHD, ADD, etc.)

Any mental condition:   \_\_\_\_\_  
(e.g. depression, bipolar disorder, eating disorders, etc.)

Allergies to medicine or any other products:   \_\_\_\_\_

Take any medication on a regular basis:   \_\_\_\_\_

Any other specific conditions to report:   \_\_\_\_\_  
(e.g. diabetes, asthma, epilepsy, etc.)

Physical limitations:   \_\_\_\_\_

## 8. About the Parent / Legal Guardian or Emergency Contact (self-sponsored students only)

Mr.  Ms. Languages Spoken \_\_\_\_\_

Family Name \_\_\_\_\_ First Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_  
(including country code) (including country code)

Email \_\_\_\_\_ Alternate Email \_\_\_\_\_

## 9. Application Fee

Please pay the application fee of CHF 250 online at [www.glion.edu/admissions/application-fees](http://www.glion.edu/admissions/application-fees)

### Application Statement

I hereby declare that all information given in this application is exact and complete. I understand that any statement in this application which proves to be untrue or purposely misleading will render the application void and that if inaccuracies are highlighted at a later stage, Glion retains the right to retract any offer made or expel the student with no refund of fees.

I agree to abide by the totality of Glion regulations, policies and procedures governing admission, enrollment and my studies at Glion, as they may be revised from time to time, including those related to academic life, student life and residency and finance. I understand that the fees and other financial conditions are revised once a year and I accept their revision. I agree that any financial information or any information related to my studies that has a financial impact may be shared with my parent / legal guardian and / or sponsor.

I consent to the storage and processing of the data contained herein by Glion under the provision of the 1992 Federal Act on Data Protection.

I hereby declare to abide by the Swiss law in case of a dispute related to the interpretation or to the execution of my legal obligation towards Glion and accept the exclusive competence of the Vaud and/or Fribourg Cantonal court.

I have read and understood the above conditions and accept them in full.

Signature of the Applicant \_\_\_\_\_  
(sign printed version of this document, scan and upload)

Date

Signature of the Parent/Legal Guardian \_\_\_\_\_  
(if applicant is under 18 years old)

Are you working with a representative of our school to support your application to Glion?  Yes  No If yes, please state:

Name of the representative/company \_\_\_\_\_ If company, name of contact (if known) \_\_\_\_\_

Location of the representative \_\_\_\_\_

Please email to [onlineapp@glion.edu](mailto:onlineapp@glion.edu) or send to your Education Counselor.