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| **Master in Applied Research****in Economics and Business****Facultat d’Economia i Empresa**Edifici B Universitat Autònoma de Barcelona08193 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: |
|       |       |       |       |
|       |       |       |       |
| 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 |