University of Co-operative and Management, Sagaing

Department of Commerce

MFM Programme (Online Second Batch)

Application Form

Photograph

Name ---------- Age: ----------

Date of Birth ----------

Gender Male ☐ Female ☐

N.R.C No. ----------

Father's Name ----------

Nationality & Religion ---------- Race ----------

Marital Status Single ☐ Married ☐

Correspondence Address ----------

Permanent Address ----------

Telephone Office ---------- Fax: ----------

Res: ---------- E-mail ----------

Academic Record

Sr. No.	Degree/Diploma/Certificate	Institution		Year of Graduate	Remarks
1					
2					
3					

(Please attach the copy of graduation certificate with the application)

Working Experience

Current Job

Job Title ----------

Organization ----------

Year of Services ----------

Address Office ----------

Residence ----------

Telephone No. Office ----------

Residence ----------

Fax Office ----------

Residence ----------

E-mail Office ----------

Residence ----------

Employment History (Starting with most recent employment)

Sr. No.	Employer	Location	Job Title	From(mm/yy)	To(mm/yy)
1					
2					
3					
4					
5					

If self-employed describe the type and location of business

If not included above, state what you have been doing since you left University

---

Two letters of Recommendation

(Please provide the details of the two persons who will give letters of recommendation for you.)

	(Academic)		(Workplace)
(i) Name	----------	(ii) Name:	----------
Position	----------	Position	----------
Organization	----------	Organization	----------
Address	----------	Address	----------

Write a short paragraph on how you expect the MFM degree to contribute to year career.

TO THE BEST OF MY KNOWLEDGE, THE INFORMATION IN THIS APPLICATION IS A TRUE, COMPLETE AND ACCURATE ACCOUNT.

---------- ----------

Applicant's Signature Date