# MICHAELUNIVERSITY

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# APPLICATION FORM

**Instructions:** In preparing this application, please type or print. Be sure to sign and date this form.

____Undergraduate ____Graduate _____Doctoral Programme

1. Name:_____
   First Middle Last Maiden
2. National Identification Number: _____
3. Date of birth:_____/_____/_____ Place:_____Citizenship: _____
   Day/Month/Year
4. Address:_____
   Number & Street Apartment/Unit Number
   _____
   City County State Country Zip Code
5. Telephone Contacts:_____(Cel) Email:_____
6. Facebook Account: _____
7. Employer:__Position: _____
8. Education/Diploma & Degrees Obtained: _____
   _____
9. Course:_____
10. Specialization _____
11. Date (DD/MM/YYYY):_____/_____/_____ Signature: _____
12. Recruitment Agent: _____

## USD Wiring Instructions

USD Currency Only:

| | |
|---|---|
| **Intermediary/ Correspondent bank: Swift: CHASUS33**<br>JPMORGAN CHASE BANK<br>NEW YORK, NY<br>ABA: 021000021 | **Beneficiary Customer Info:**<br>**Customer Name-** MCHARI INSTITUTE<br>**Address:** S/ TACKWOOD CT. S/ EASTERN RD.<br>Nassau, Bahamas<br>Customer A/c#: 000180440<br>Branch Transit #: 03465 |
| **Beneficiary Bank: Scotiabank Bahamas ltd**<br>Nassau, Bahamas<br>Swift: NOSCBSNS<br>A/C # 001042940 | |

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*There are no refunds on any tuition payments.*

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