



APPLICATION FOR ADMISSION 2013

ADMISSION PROCESS

Receipt of your application will be confirmed via email within three (3) business days of its arrival to our offices. Applicants will be notified of their admission status by email. Program tuition is payable upon confirmation of admission.

GENERAL INFORMATION

Title: _____

Name: _____
(First) (Middle) (Family)

Name for Name Badge: _____ **Male** **Female**

Country of Passport(s): _____ **Date of Birth:** _____
(Month/Day/Year)

Current Job Title: _____

Company/Organization: _____

Business Address: _____ 1
(Street) (City)

_____ (Country) (Zip Code/Postal Code)

Business Phone: _____ **Fax:** _____
(Please include country code and area or city code)

Mobile Phone: _____ **Skype ID** _____
(Please include country code and area or city code)

Company Website: _____ **Email:** _____

International VAT Nr.: _____

Home Address: _____
(Street) (City)

_____ (Country) (Zip Code/Postal Code)

Home Phone: _____
(Please include country code and area or city code)

Private & Mobile Phone _____
(Please include country code and area or city code)

For more details and support: +49 30 52 004 76 86 • coachrbs@booker-international.com • www.booker-international.com



COMPANY INFORMATION

Types of Products/Services: _____

Number of employees/staff: _____

Name of Parent Organization: _____

Number of employees in Parent Organization: _____

PLEASE CHECK YOUR CURRENT INDUSTRY

- | | |
|---|--|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Manufacturing - Consumer |
| <input type="checkbox"/> Advertising / Marketing | <input type="checkbox"/> Manufacturing - Industrial |
| <input type="checkbox"/> Aerospace / Defense | <input type="checkbox"/> Military |
| <input type="checkbox"/> Agriculture / Food / Beverage | <input type="checkbox"/> Mining / Metal Processing |
| <input type="checkbox"/> Automotive | <input type="checkbox"/> NGOs |
| <input type="checkbox"/> Biotechnology | <input type="checkbox"/> Petroleum / Oil / Gas |
| <input type="checkbox"/> Broadcasting | <input type="checkbox"/> Pharmaceuticals/ Medical Devices |
| <input type="checkbox"/> Chemicals | <input type="checkbox"/> Printing / Publishing |
| <input type="checkbox"/> Computer / Peripherals | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Coaching | <input type="checkbox"/> Retail / Wholesale |
| <input type="checkbox"/> Construction / Engineering | <input type="checkbox"/> Software |
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Soft Skills Training |
| <input type="checkbox"/> Electronics / Semiconductors | <input type="checkbox"/> Sports |
| <input type="checkbox"/> Entertainment / Leisure | <input type="checkbox"/> Telecommunications / Information Services |
| <input type="checkbox"/> Environmental Services | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Financial Services / Insurance | <input type="checkbox"/> Tourism |
| <input type="checkbox"/> Food Services / Lodging | <input type="checkbox"/> University |
| <input type="checkbox"/> Government | <input type="checkbox"/> Utilities |
| <input type="checkbox"/> Health Care Services | <input type="checkbox"/> Vocational Education |
| <input type="checkbox"/> Legal / Advocacy Services | <input type="checkbox"/> Other _____ |

POSITION INFORMATION

Number of people you manage directly: _____

Job title of the person to whom you report: _____

Annual budget in your control (in EUR): _____

Number of months/years in this position _____

WHAT FUNCTION BEST DESCRIBES YOUR POSITION?



- Accounting/Control
- Coaching
- Engineering
- Entrepreneur
- Finance
- Fundraising
- General Management
- Human Resources
- Information Services
- Law
- Logistics
- Manufacturing/Operations
- Marketing
- Medical
- Planning
- Product Development
- Project Management
- Public Relations
- Purchasing
- Quality Control
- Religion
- Research & Development
- Sales
- Security
- Teaching
- Training
- Other _____

WORK EXPERIENCE

Please list your positions in reverse chronological order, starting with your current one. If all positions are in the same company, please give the major promotional sequence.

Company/Organization	Position	Start Date (mm/yyyy)	End Date (mm/yyyy)	3 _____

Please describe your current responsibilities.

What do you hope to achieve by participating in this program?

What are the toughest challenges facing your organization and/or business unit?

CULTURAL COMPETENCY

Please list all your language skills, noting the proficiency level for each.

Language	Level of Proficiency			
	Native	Impressive	Getting by	Beginner

Other:

With which cultures are you familiar? Please explain your connection with each one.

Place of birth:

Family:

Raised in community of:

Lived/studied there

Working there

Which significant relocations, domestic or international, have you made to date? Please list all.

(e.g. student exchange, work assignment, language study, family matters, etc.)

Relocation to

Reason for Relocation

When working with people from foreign cultures, what challenges do you face most frequently?

Please explain.

Have you previously participated in a cross-cultural training program or coaching? Yes No

<i>If yes, when?</i>	<i>Program</i>	<i>Method</i>	<i>Target Country</i>	<i>website</i>

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EDUCATION

- DEGREES** High School 2-year College BS/BA MS/MA MBA
- JD/Law PhD MD Diploma Other

University: _____ **Year:** _____

University: _____ **Year:** _____



University: _____ **Year:** _____

PROFESSIONAL EDUCATION

School/Program	Start Date (mm/yyyy)	End Date (mm/yyyy)

MANAGEMENT AND/OR LEADERSHIP PROGRAMS ATTENDED

School/Program	Start Date (mm/yyyy)	End Date (mm/yyyy)



BILLING INFORMATION

An invoice will be emailed to the individual indicated below.

Title: _____

Name: _____
 (First) (Middle) (Family)

Job Title: _____

Company/Organization: _____

International VAT Nr. _____

Business Address: _____
 (Street) (City)

_____ (Country) (Zip Code/Postal Code)

Business Phone: _____ **Fax:** _____
 (Please include country code and area or city code)

Company Website: _____ **Email:** _____

CANCELLATION POLICY

Payment is due within 30 days of the invoice date. Cancellations must be submitted in writing more than 30 days before the program start date to receive a full refund. Due to program demand and the volume of preprogram preparation, cancellations received 14 to 30 days before the program start date are subject to a fee of one-half of the program fee. Requests received within 14 days of the program start date are subject to full payment of the program fee.

Upon acceptance, payment is required up to 30 days prior to the program start date2013.

Signature of Applicant: _____ **Date:** _____

I certify that all the information and accompanying material provided in connection with this application are authentic and accurate.

PLEASE RETURN THIS APPLICATION

BY EMAIL:

Applications may be submitted online at: rbs@booker-international.com

BY FAX:

Booker International e.K.
Intercultural Coaching Academy
Fax: +49 30 52 004 7687

For more details and support: +49 30 52 004 76 86 • coachrbs@booker-international.com • www.booker-international.com

SPONSORING STATEMENT (IF APPLICABLE ONLY!)

Name of Applicant:

(Dr./Mr./Ms.) (First) (Middle) (Family)

Company/Organization:

Session Date:

This statement should be completed by a senior executive of the organization who is thoroughly familiar with the candidate and can provide a detailed, firsthand appraisal. The candidate's application will not be reviewed until the application and Sponsoring Statement all have been received.

To be eligible for attendance, the candidate must be a full-time employee of the sponsoring company throughout the entire session of the Cultural Detective® Coaching Program, and agree to return full-time to the sponsoring organization in a managerial role upon completion of the program.

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Please have your sponsoring executive complete this Sponsoring Statement. Appraisals should evaluate the candidate's potential increase in responsibility, both short term and long term. These documents may be sent directly from the sponsoring official to Booker International or, if appropriate, may be sent together with the application.

Booker International does not discriminate against any person on the basis of race, color, sex or sexual orientation, gender identity, religion, age, national or ethnic origin, political beliefs, veteran status, or disability in admission to, access to, treatment in, or employment in its programs and activities.



SPONSOR INFORMATION

Name of Sponsoring Official:

_____ (Dr./Mr./Ms.) (First) (Middle) (Family)

Title or Position:

Company/Organization:

Company Address:

_____ (Street) (City) (Country) (Zip)

Company Phone:

_____ (Including country & city code)

Fax:

_____ (Including country & city code)

Company Website:

Email:

Please describe the responsibilities of the applicant within the organization, including reporting relationships.

Number of all reporting levels above the applicant:

9 _____

Number of people under the applicants supervision:

Please indicate any prospective changes in the applicant’s position and/or future responsibilities within the company and, in particular, what those responsibilities will be upon returning from the program.

Please describe your objectives in nominating the applicant for the Cultural Detective® Coaching Program.

Have you discussed these objectives with the applicant? Yes No

How would you evaluate the applicant's strengths, as well as areas for development? Consider such factors as knowledge of Human Relations, Intercultural Competency, Marketing, and Leadership.

PLEASE NOTE:

- It is understood that participants will be completely free of official duties while members of the program, and that they will not be asked to be absent from the program except for emergencies.
- The candidate's application will not be reviewed until the application and Sponsoring Statement all have been received.
- Payment is due within 30 days of the invoice date. Cancellations must be submitted in writing more than 30 days before the program start date to receive a full refund. Due to program demand and the volume of preprogram preparation, cancellations or deferrals received 14 to 30 days before the program start date are subject to a fee of one-half of the program fee. Requests received within 14 days of the program start date are subject to full payment of the program fee.

Upon acceptance, payment is required 30 days prior to the program start date.

Signature of sponsoring official: _____ Date: _____

I certify that all the information and accompanying material provided in connection with this application are authentic and accurate.

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