

IPI Application Form



International Packaging Institute

I applied following form

01 M > Master of Engineering in Packaging Technology, Start March Year

Personal Data of the Applicant

First Name _____

Last Name _____

Date of Birth _____ Place of Birth _____

Gender female male

Nationality _____

Permanent Address

Street _____

Zipcode, City _____

Country _____

Phone _____ Fax _____

Email Address _____

Address for Correspondence

Street _____

Zipcode, City _____

Country _____

Phone _____ Fax _____

Email Address _____

Company Address

Company Name _____

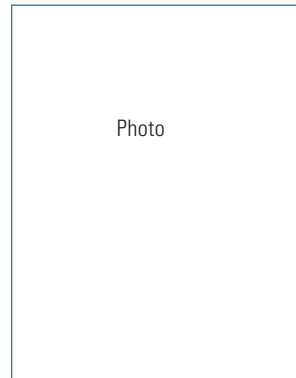
Street _____

Zipcode, City _____

Country _____

Phone _____ Fax _____

Email Address _____



Booking

Participation Places will be allocated on a first come, first served basis, so early booking is recommended.

Cancellation

Cancellation must be notified in writing ten workingdays before the course. Payment in full will be required in cases of cancellation after this date or non-attendance at the seminar. A booking may be transferred to another person at any time, however. The programme organiser reserves the right to change the programme where necessary.

Please send your completed application to:

IPI International Packaging Institute
Neustadt 51
8200 Schaffhausen, Switzerland

Phone +41 52 675 51 51
info@ipi.eu
www.ipi.eu

Educational History



International Packaging Institute

02

Secondary Education or High School Please enclose a certified copy of your secondary education or high school record.

Qualification	
Date	Place
Institution	
Result	

College or University Education Please enclose certified copies of your degrees and grades

Dates of Attendance	Institution	Subjects	Qualifications obtained

Work Experience after Study Time Please enclose your records of employment (copies of certificates).

Dates	Employer	Title	City, Country

Responsibilities

Dates	Employer	Title	City, Country

Responsibilities

Please send your completed application to:

IPI International Packaging Institute
Neustadt 51
8200 Schaffhausen, Switzerland

Phone +41 52 675 51 51
info@ipi.eu
www.ipi.eu

Recommendation Form



International Packaging Institute

04 M > Master of Engineering in Packaging Technology

Part 1: To be completed by the applicant

The application is to be accompanied by two letters of recommendation from persons able to attest to the academic and/or professional qualifications of the applicants. The enclosed preprinted forms are to be used for these letters. Each of the letters of recommendation is to be placed in a separate sealed envelope by the expert appraiser, marked with the sender's details and enclosed with the application, and must be received by the deadline for close of applications (for the Master study by February 15 of the year concerned).

First and Last Name of the Applicant

Street

Zipcode, City, Country

Phone

Fax

Email Address

Part 2: To be completed by the recommender

First and Last Name of the Recommender

Company Name

Position

Street

Zipcode, City, Country

Phone

Fax

Email Address

Please send your completed application to:

IPI International Packaging Institute
Neustadt 51
8200 Schaffhausen, Switzerland

Phone +41 52 675 51 51
info@ipi.eu
www.ipi.eu



International Packaging Institute

05 Specific comments about significant attributes, both positive and negative, are more useful than general statements. Feel free to supplement this form with additional information that you think is important. If you choose to do so, please provide this information on your own letterhead.

1. How long and in what capacity have you known the applicant?

2. Under what circumstances have you known the applicant?

3. Would you be willing to work with the applicant or choose the applicant to work on a project for which you were personally responsible?

4. Please assess the applicant in the following areas and indicate the reference group used for your judgments.

Reference Group: _____

	excellent	good	average	poor	unable to judge
Written Communication					
Oral Communication					
Judgment and Maturity					
Willingness to work hard					
Ability to work with others					
Creativity, innovative nature					

5. In the space below, please provide any additional comments about the applicant's potential.

6. In my opinion I
- | | |
|--|---|
| <input type="checkbox"/> highly recommend | <input type="checkbox"/> recommend |
| <input type="checkbox"/> recommend with reservations | <input type="checkbox"/> do not recommend |

this applicant to be admitted to the Master of Engineering in Packaging Technology

Place, Date

Signature of Applicant

Please send your completed application to:

IPI International Packaging Institute
Neustadt 51
8200 Schaffhausen, Switzerland

Phone +41 52 675 51 51
info@ipi.eu
www.ipi.eu