



IEA UK 

**International Entrepreneurs Association
England and Wales, United Kingdom**



Provider Application – External Campus Form

Type of Application :

Please indicate the external campus status of application:

New Renewal Detail Changes Other _____

Please indicate type of intention status:

Business Associate External Campus Provider Strategic Partner
 Branch/Representative Other _____

Organisation Particulars :

Organisation Name :

Website / URL : Company Email :

Type of Organisation Status : Public Sector Private Sector
 University College Vocational Institution
 Training Provider Consultancy Firm Other _____

Government Approval Concern :

License Registration No : Date of Approval :

(Kindly please attach the relevant documentation applicable to support your licensing status)

Applicant Contact Details :

Title : Mr. / Mrs. / Ms / Dr. / Prof

Name : Designation / Position :

Citizenship : Commencement Date :

Identity Card /Passport No : Email :

Postal Address :

Mobile No : Telephone No :

Fax No : Secondary Email :

Please indicate the knowledge / Skills / Experiences for supporting the respective application for references

Please indicate the liaison coordinator detail if different from the above:

Primary Coordinator Contact Person :

Contact No : Email :

Programme Delivery Method:

Please indicate external campus status of proposed programme enrol date :

- Full Time (Classroom / Traditional instructor led)
- Full Time (Blended Learning – Classroom + E-Learning)
- Part Time (Self- paced E-learning)
- Part Time (Self-paced research development learning)
- Conferences / Workshop / Seminar
- Others : _____

Type of Proposed Programme Espouse :

- Undergraduate (Diploma / Advanced Diploma / Graduate Diploma)
- Professional Post Graduate Diploma
- Professional Certified
- Certification
- Research Dissertation Programme
- Others : _____

Specific Programme Delivering Particulars:

- *Majoring / Specification for Undergraduate -*

- | | |
|---|--|
| <input type="checkbox"/> Entrepreneurship | <input type="checkbox"/> E-Commerce |
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Sales and Marketing |
| <input type="checkbox"/> Applied Business Computing | <input type="checkbox"/> Supply Chain Management |
| <input type="checkbox"/> Business Communication | |

Customisation :

(As for specially tailormate programme / credit transfer courses, kindly please attach assessment and courses details)

- *Professional Categories Specification –*

Title of Programme Educated :

Proposed Issued Date :

- Professional Certified Certification Professional Post Graduate Diploma

- Please indicate the language of the programmes are offered in :

(Providers outside the UK in countries where English is not the first language, please be assure that students are recommended to attained acceptable English standard (eg. IELTS / TOEFL) to fulfil the British Qualification framework and only eligible for acceptance on credit transfer articulation criteria. Others language will still be acceptance for conducting the programme but only limited on IEA recognition and qualification achieved .)

Type Performance and Quality Measurement Particular:

- Please assure to attached the IEA provider Center Accreditation form.
 - Please state how the quality and standard of training and assessment by the External Campus for conducting the programme will be guaranteed. (How will the External Campus monitor the assessment of students? What are the arrangements for internal verification? What checks will be carried out? How will the assessment process be evaluated and reviewed? You may attach any supporting articles ,documents or photo etc.
 - Please assure that there is evaluation on the courses / programme being conducted.
 - Fulfilment of photo section during classes or end of the class is highly recommended for record keeping
 - Other relevant quality control procedures and improvement method is highly supported.
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Declaration :

By signing below, I affirm, under penalty of perjury under the laws of the United Kingdom, that I have read and will comply with the British qualification education regulations framework, and that all statements contained in this application are true and correct. I hereby attest that I have personally filled in this application form and the information contained herein is complete and accurate to the best of my knowledge. I understand that withholding or giving false information will make me ineligible for succeed of application. I further understand that I may be required to appear for an interview or to undergo such some relevant assessment as requested by IEA Board of Admission as a condition for evaluation and inspection for the approval effort.

()
Applicant's Signature & Name

Date

For Representative / Provider :

Provider ID :

Provider's Name :

Representative's Stamp :

()
Representative's Signature & Name

Date

For Office Use Only :

Tracking information :

Applicant Validation No. :

Evaluator's Initials :

Provider ID. :

Remarks :

Date Approved :

Date Expired :