

## Student information form

Submit this form to: Academic Head, Lumina College, 3/F, Breakthrough Centre, 191 Woosung Street, Kowloon, Hong Kong | or send electronically to: master@lumina.edu.hk

Date of applicat	ion: _								
I am applying for:  ☐ Asbury University: Master of Arts in Communication: Digital Storytelling ☐ Cairn University: Master of Business Administration ☐ Calvin University: Master of Education									
Last name in English:			First name in English:						
Chinese name (if availab		lable):	Date of birth:						
Gender:	Daytime contact phone number:								
Home address:									
Email address:			C	Citizenship:					
Previous education (List all colleges and universities attended.)									
Years of attendance	Colle	llege/university		Majors/minors		Degree			
<b>Teaching certification</b> (only applicable for Calvin University's Master of Education program) (List all the teaching certificates and endorsements you currently have.)									
Employment experience (List all work experience since your bachelor's degree.)									
Employer		Location	Responsibilities Dates		tes				

English proficiency									
I have a valid TOEFL/I	FLTS score· [	⊒Yes □	ì No						
(If "No") I would like to apply for a waiver for the English proficiency requirement.									
□ Yes	11 7	□ No	_	pplicable					
How did you learn about the academic programs at Lumina College?									
□ Emails									
□ Lumina's website									
☐ Lumina's seminars or presentations									
☐ Social media (e.g. Facebook, Whatsapp, etc)									
☐ Family's / Friend's recommendation									
☐ School's / Teacher's recommendation									
<ul> <li>Other Christian publications or websites</li> </ul>									
□ Other:									
Privacy Policy Statem	ent								
out in the Privacy Policy Statement o  1. Provision of personal data is  2. The information collected v processing your reques  3. The submission of personal service or answering a  4. It is possible that any informany loss or damage to 5. Information we collect about functions and activitie  6. We will not disclose any per required to do so by lat  7. Information submitted to L	f Lumina College. s necessary for processing will be used for the purposest; answering your enquired data is voluntary. However, and the end of	g the request/enquiry sub ses of: authenticating you ry; promoting our activitie ver, insufficient personal o mically could be observed tial. Data may be provided ded by you to any external pt for a maximum period n of information about yo	mitted by you. r eligibility to use the reses; preparing statistics. data may prevent Lumina by a third party in transit to Lumina College for la bodies or organizations of 12 months unless othe u held by Lumina College	e. We may charge you an administration					
Have you read the abo	ve privacy polic	cy statement of	Lumina Colleg	e?					
Yes, I have read the above privacy policy statement of Lumina College.									
Please indicate below if you wish to receive future information from Lumina College.									
☐ Yes, please keep me informed.									
□ No, thank you.									
Signature:									