



**MSc MARKETING
ORDER FORM**

Please complete ALL fields.

CONTINUING STUDENTS ONLY

EBS SID # _____

Title:	First Name:	Surname:
Date of Birth: (dd/mm/yyyy)		Mobile Phone:
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E-Mail (1):		E-Mail (2):
Mailing Address:		

Tuition (Online classes) are offered for subjects in bold			
Tick to Select Subject.			
<i>Stage 1</i>		<i>Stage 2</i>	
Core Course	Elective Course	Core Course	Elective Course
<input type="checkbox"/> Consumer Behaviour	<input type="checkbox"/> Quantitative Methods	<input type="checkbox"/> Marketing Insights	<input type="checkbox"/> Negotiation
<input type="checkbox"/> Strategic Marketing		<input type="checkbox"/> Marketing Communications	
<input type="checkbox"/> Marketing (old)			
<i>Stage 3</i>			
Core Course		Elective Courses Cont'd	
<input type="checkbox"/> International Marketing		<input type="checkbox"/> Sales Force Management	
Elective Courses		<input type="checkbox"/> Services Marketing	
<input type="checkbox"/> Marketing Channels		<input type="checkbox"/> Research Methods for Business & Management	
<input type="checkbox"/> Principles of Retailing			
Tick to Select Payment Method			
<input type="checkbox"/> WiPay Payment Plan		<input type="checkbox"/> Online/Direct Deposit	

EXEMPTIONS: I hereby agree that if I purchase a Course for which I may be granted an exemption, I will **not** receive a refund.

DECLARATION: By signing and submitting this form to masters@sbc.edu.tt, I agree to the following: (1) To the exemption clause above (2) My information may be shared with EBS (3) My email address may be shared for Educational purposes (4) That the above information is accurate.

Sign: _____

Date: _____