

**IMO INTERNATIONAL MARITIME LAW INSTITUTE
INSTRUCTIONS AND CHECKLIST**

INSTRUCTIONS

The Ph.D. Application Form, the Ph.D. Research Proposal Form and two Reference Forms are to be completed and sent along with documents relating to university qualifications to:

The Director
IMO International Maritime Law Institute
Msida Heights, Tal-Qroqq
P.O. Box 31
Msida MSD 01
Malta
Fax: (356) 21 343092
E-mail: admissions@imli.org

Where needed, also include proof of English language proficiency.

Please use the following **checklist** to ensure that all necessary documents are completed and attached.

Ph.D. Application Form

To be completed and signed by the applicant. A recent photograph of the applicant is to be attached.

Documents relating to university qualifications

Duly certified true copies of documents in evidence of all university qualifications are to be attached.

Documents relating to English language proficiency (where applicable)

A duly authenticated certificate or other document in evidence of English language proficiency is to be attached (see document entitled "English Language Proficiency Testing Systems").

Ph.D. Research Proposal Form

To be completed by the applicant. Where needed, additional sheets may be attached.

Reference Forms

Two references are required. Referees are persons who are not related to the candidate and who are familiar with the candidate's character and qualifications.

**IMO INTERNATIONAL MARITIME LAW INSTITUTE
PH.D. APPLICATION FORM**

INSTRUCTIONS:

Please answer each question clearly. Type or print in ink. If you need more space, attach additional pages.

Please affix photo here

1. FULL NAME (please underline family name)

.....
.....

2. Mailing address: **Telephone (with country & area code):**
 (Office)
 (Residence)
Facsimile: **E-mail :**

3. (a) Date of birth:..... **(b) Nationality:**..... **(c) Sex:**.....
(d) Marital status:..... **(e) Mother tongue:**.....

4. LANGUAGES	READING			WRITING			SPEECH		
	Excel- lent	Good	Fair	Excel- lent	Good	Fair	Excel- lent	Good	Fair

PLEASE ATTACH CERTIFIED COPIES OF AVAILABLE CERTIFICATES/TEST REPORTS; OR DETAILS OF TYPE AND DURATION OF ENGLISH LANGUAGE STUDIES/EXPERIENCE.

5. EDUCATION: Give full details, using the following space insofar as possible.
(A) University or equivalent

Name of institution and address	Years attended From To	Degrees and academic distinctions	Main subjects

PLEASE ATTACH CERTIFIED COPIES OF DOCUMENTS SUPPORTING UNIVERSITY QUALIFICATIONS.

(B) Schools or other formal education or training from age 14 (e.g. high school, technical school, or apprenticeship).

Name of institution	Type	Years attended From To	Certificates/diplomas obtained

6. PROFESSIONAL QUALIFICATIONS:

Name/Country of institution	Qualifications obtained	Study period	Subjects

7. MEMBERSHIP OF PROFESSIONAL SOCIETIES, PUBLICATIONS, ETC.

8. EMPLOYMENT RECORD: Starting with your present or most recent post, list in reverse order every employment during the last ten years and any significant experience not included in that period which you believe will be helpful in evaluating your record. Use a separate block for each post. Use additional sheets of paper as required.

Dates :	Exact title of your post :
From :	To :
Type of business :	
Name of Supervisor:	Name of Employer:
.....
.....
Address of Employer :	
.....	
Description of work you do:	

8. EMPLOYMENT RECORD (Continued):		
Dates :	Exact title of your post :	
From :	To :	Type of business :
Name of Supervisor:..... Name of Employer:.....		
Address of Employer :		
Description of work you do:		
8. EMPLOYMENT RECORD (Continued):		
Dates	Exact title of your post :	
From :	To :	Type of business :
Name of Supervisor:..... Name of Employer:.....		
Address of Employer :		
Description of work you do:		
8. EMPLOYMENT RECORD (Continued):		
Dates :	Exact title of your post :	
From :	To :	Type of business :
Name of Supervisor:..... Name of Employer:.....		
Address of Employer :		
Description of work you do:		

8. EMPLOYMENT RECORD (Continued):		
Dates	Exact title of your post :	
From :	To :	Type of business :
Name of Supervisor:..... Name of Employer:..... 		
Address of Employer :		
Description of work you do:		
9. State any other relevant facts and information which will assist in assessing your application:		
<p>I certify that the statements made by me in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief. I understand that any false statements or any required information withheld from this form may provide grounds for the withdrawal of any offer of admission from the Institute. If admitted, I undertake to:</p> <ol style="list-style-type: none"> (1) conduct myself at all times in a manner compatible with my status as a student of the IMO International Maritime Law Institute; (2) abide by the Doctor of Philosophy – Ph.D. – Degree Programme Regulations and any amendments thereto which may be adopted from time to time by the Institute; (3) abide by any bye-laws applicable to Ph.D. students which may be adopted from time to time by the Institute; 		
Date: _____	Signature of Applicant: _____	

