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Registration Form

Study course

- **MAS in Cardiovascular Perfusion**

Course begins: upon consultation

Registration deadline: 31.05.2018 or on demand

Final Registration

Personal Details

Surname

First name

Street

Postcode, City

Canton

National Insurance Number (AHV)

Date of Birth

Place of Birth

Nationality

Phone (home)

Phone (work)

Mobile phone

Email (home)

Email (work)

Please
attach
current photo

Please also send
an electronic photo
to:
gesundheit@
kalaidos-fh.ch

Details of Employer

Name of Institution

Name of Contact / Line Manager

Department / Clinic

Current Position of Contact Person

Street

Postcode, City

Canton/State

Phone Contact Person

Email Contact Person

Study Fees

The study fees are usually borne by the contracted organisation. The contracted organisation's regulations apply.

For foreign students in transfer programmes each module normally costs CHF 2050.-.

Costs such as travel expenses, books, laptop etc. are borne by the student.

I had vocational training in Cardiovascular Perfusion
Degree:

Admission requirements

- Apprenticeship as Qualified Nursing Professional HF/FH (or an equivalent accredited degree)
- Apprenticeship in anaesthesia care or apprenticeship in intensive care (or admission "sur dossier"/ portfolio)
- To be able to read and understand English expert literature and to be able to follow classes taught in English
- Prospect of an internship in the area Cardiovascular Perfusion
- Admission interview

Details of education and professional training

Please attach photocopies of corresponding documents.

Completed Degree (tertiary level A)

Year

- Completed University Degree
Field of study:
- Completed University of Applied Sciences Degree
Field of Study:

Completed Apprenticeship(s) (tertiary level B)

Year

- Apprenticeship in anaesthesia care or apprenticeship in intensive care
- Apprenticeship as Qualified Nursing Professional

Professional Postgraduate Training with Degree

Year

-
-
-
-

Completed Secondary Level II Training

Year

- 3 years of Intermediate Diploma School, Business College, Vocational Secondary School
- High School with A-level
- Swiss Certificate of Competence as
- Federal Vocational Baccalaureate, field:
- Equivalence to the Federal Vocational Baccalaureate → if no Intermediate Diploma School, Business College, Vocational Secondary School, A-level/Baccalaureate
Please enclose evidence or request documents.
- English (First certificate – or evidence of equivalent level)

Professional Experience

From (month/year)	To (month/year)	Position	Workload
			%
			%
			%
			%
			%
			%
			%

Current professional practice (please provide address)

Institution:

Position:

Street:

Postcode / City:

Comments:

Internship in the area of cardiovascular perfusion (please provide address)

Please attach a confirmation of the institution where the internship will be undertaken.*

Institution:

Street:

Postcode / City:

Comments:

* The confirmation can be submitted up until 6 weeks before the start of the study course.

Invoice

Invoices are issued in instalments (per module).
Different forms of payment may be made with the Admission Office.

The invoice of the study fees may be sent to:

- Home address Employer ^{*)}
*) If the invoice is sent to the employer, please provide confirmation.

Registration

I accept the contract requirements (see page 7) and register.

Place, date: _____ Signature: _____

Attachments

I attach the following documents to the registration form:

All the documents must be handed in, if available.

- 1 current passport photo (additionally, for the student ID card)
- Photocopies of completed apprenticeship(s) secondary level II
- Photocopies of completed apprenticeship(s) tertiary level
- Photocopies of professional postgraduate training with degree
- Photocopies of last school certificate (e.g. secondary school, apprenticeship, etc.)
- Grades of the subjects German, English and Maths
- Confirmation of internship
- Confirmation of employer, if invoice is issued to them

**The Programme Director will examine your registration documents and contact you by phone to arrange an admission interview.
You will receive a written confirmation of your registration after the admission decision has been made.**

Please send registration documents to:
Kalaidos Fachhochschule Gesundheit (University of Applied Sciences, Department of Health Sciences), Studiensekretariat (Admission Office)
Pestalozzistrasse 5, CH-8032 Zürich

Contract Terms and Conditions MAS in Cardiovascular Perfusion

Registration

For registration the registration form has to be completed.

Confirmation of Registration

The contract between the student and the Kalaidos University of Applied Sciences, Department of Health Sciences is completed with the student's registration and written confirmation by the admission office.

Registration Deadline, Registration Fee

The registration deadline is defined in accordance with the registration form. The registrations are considered in the order of their arrival.

Cancellation due to Subparticipation

The Kalaidos University of Applied Sciences, Department of Health Sciences explicitly reserves its right to cancel the course 6 weeks before course begin the latest, due to subparticipation or other circumstances which make carrying out the programme impossible. In this case payments already made will be fully refunded. Further compensation claims are excluded.

Financial Regulations

Invoices of study fees are due before the beginning of each module. In the case of absence from class, deductions from the study fees or module fees cannot be claimed. This applies also to absence due to military service, illness, holidays or professional workload. There will be additional fees for resits and re-examinations. Students who are employed by a Swiss hospital or are doing an internship in a Swiss hospital, arrange their financial contributions with the employing cooperating hospital. Expenses such as books, journeys, laptop etc. are borne by the students.

Price Guarantee

The study fees according to the registration form are valid at the time the registration form is submitted. In case of the resumption of studies after a cancellation or an interruption of more than one year the then valid fees become effective.

Withdrawal Before Start of the Course

If the notice is handed in within 8 weeks before the start of the course, an additional reimbursement for expenses of CHF 800.- is due. Fees already paid will be refunded. The notice has to be made by registered letter.

Withdrawal During the Course

At the end of each module a withdrawal from the course is possible. 6 week before the start of the next module the notice with a registered letter must be with the Kalaidos University of Applied Sciences, Department of Health Sciences. In case of non-compliance with the deadline a reimbursement for expenses of CHF 800.- is due. If notice is submitted after the beginning of the module the module will be fully offset. Fees already paid for further modules will be refunded.

Withdrawal Due to Non-Compliance with Promotion Requirements

If the student does not pass the exams and, if applicable, resits scheduled according to the examination regulations, a cancellation of the contract for the students due to the non-compliance of the Promotion requirements is possible. Fees already paid for subsequent modules will be refunded.

Insurance

The attainment of accident insurance, health insurance and liability insurance is up to the student.

Final Regulations

The Kalaidos University of Applied Sciences, Department of Health Sciences reserves the right to make changes to the study programme and to the management in terms of improvement.

Data Protection

The student explicitly accepts that his/her details (name, address etc.) are saved for internal use only and that they may be used for e.g. marketing purposes of the Kalaidos University of Applied Sciences, Department of Health Sciences. The student's details have to be forwarded to the Federal Statistical Office. Data protection and security are guaranteed by the Federal Statistics Law and the Data Protection Law. The Federal Office's use of the information is permitted for statistical purposes only.

Confirmation

I confirm that within the last two years I have not been suspended definitively from a study programme of the same field of study nor of the same degree.

I accept the terms of the contract.

Place, date: _____

Signature: _____

Filled in by the University:

Sec. Level II	<input type="checkbox"/> EFZ	<input type="checkbox"/> DMS / HMS / FMS	
	<input type="checkbox"/> BM	<input type="checkbox"/> gymnasiale Matur	
Equivalence Federal Vocational Baccalaureate (BM)	registered	<input type="checkbox"/> G	<input type="checkbox"/> E <input type="checkbox"/> M
	passed	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Degree tertiary level		<input type="checkbox"/> Professional postgraduate training	
<input type="checkbox"/> PFP HF	<input type="checkbox"/> NDS Intensiv	<input type="checkbox"/> NDS Anästhesie	
<input type="checkbox"/> PFP BScN	<input type="checkbox"/> HöFa II	<input type="checkbox"/>	
To the study course	<input type="checkbox"/> admitted (admission criteria fulfilled) <input type="checkbox"/> admitted with attendance of the module „Research Results: Findings and Evaluation“ <input type="checkbox"/> admitted, subject to reservation <input type="checkbox"/> not admitted Reasons:		
The following modules can be taken into account/transferred/credited:			
.....			
.....			
Date / Visa:			