

MASTER OF PROFESSIONAL PUBLIC RELATIONS SELECTED ENTRY FORM

1. Person	al detail	s			
Surname:					
Forename:					
Date of birth:	Day	Day Month		Year	
Student ID:					
2. Refere	es				
To assist the s require you to contact details	supply two	referees, v	whom we n	nay contact. Pl	ease give
FIRST REFEREI	Ē				
Name:					
Email:					
Phone:					
SECOND REFE	REE				
Name:					
Email:					
Phone:					
3. Comple	eting you	ır enroln	nent onli	ine	

After completing this form, go to **enrol.massey.ac.nz** to complete your enrolment online. You will be required to upload a full CV detailing relevant work experience.