University Use Only



UNDERGRADUATE STUDIES: DIRECT APPLICATION FORM

The categories of applicants listed below who are seeking admission to the University, are required to apply directly to DCU using this form. Please indicate with a tick (✓) the category under which you are applying. If you are unsure on your eligibility or category please contact Registry at registry@dcu.ie; **Telephone**: +353-(0)1-700 5338; Fax: +353-(0)1-700 5504; DCU Web; http://www.dcu.ie/registry/applications.shtml

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	Applicants presenting Non-EU School Leaving Qualifications for full-time/part-time undergraduate degree programme. Closing date for submission of applications is 1 st July. (Please note that Non-EU applicants applying for the B.Sc. in Nursing (4 year degree) must apply through the Central Applications Office (www.cao.ie by 1 st February). Please return completed form, signed, including all necessary supporting documentation and the appropriate (non-refundable) application fee of €60 by cheque, postal order or bank-draft to Non-EU Undergraduate Admissions, International Office, John Hand Library, All Hallows Campus, Dublin City University, Drumcondra, Dublin 9, Ireland.
	Transfer applicants from another Higher Education Institution – Closing date for submission of applications is 01 st July. For further information, please refer to, http://www4.dcu.ie/registry/transfer.shtml Please note that transfer to final year of some programmes is restricted. (FETAC Level 5 applicants must apply through the CAO by 1 st February). Please return completed form together with the necessary supporting documentation and the appropriate (non-refundable) application fee of €35 by cheque, postal order or bank-draft to the Admissions Office, Registry, Dublin City University, Dublin 9.
	DCU Internal Transfer: For existing DCU students who want to apply for entry to any year other than year 1 of a programme. Closing date for applications is 1st July. Please note that transfer to final year of some programmes is restricted. See page 6 for details/requirements. Please return completed form together with the necessary supporting documentation and the appropriate (non-refundable) application fee of €35 by cheque, postal order or bank-draft to the Admissions Office, Registry, Dublin City University, Dublin 9.
	Transfers, both internal and external applications, to Nursing Programmes are restricted due to the limited number of places available. Some DCU programmes will require all applicants to meet the CAO Points and programme specific entry requirements. se complete this form in BLOCK LETTERS using BLACK ink. All questions must be answered. DO NOT blanks.
Surna	ame: First Name(s):
NAMI	E AS ON BIRTH CERTIFICATE (if different from above):

COUNTRIES OF RESIDENCE

DATE OF BIRTH: ____/___

CITIZENSHIP:

Please indicate the countries in which you were ordinarily resident for the 5 years preceding the date of this application:

GENDER: Male □ Female

COUNTRY OF BIRTH: _____

Surname: First Name(s):

Country:				From: MM/YY							To: MM/YY								
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Second Level Scho	ol Attended:		Date of	Atten	ndanc	:e:					Add	dress	s of S	choc	ol:				

Subjects Taken:	Results:

ENGLISH LANGUAGE COMPETENCY (for non-native speakers of the English language only):

Non-native speakers of English must provide proof of competence in the English language. Please see the DCU web page at http://www4.dcu.ie/registry/english.shtml for details of the minimum standard required. Copies of completed IELTS, TOEFL examinations etc. must be submitted with your application.

DETAILS OF FURTHER EDUCATION / PROFESSIONAL EDUCATION (IF ANY) (Transcripts to be included)

In chronological order moving from left to right:

Institution Attended				
Period of Attendance				
Name of Programme				
Duration of Programme				
Full-Time or Part-time				
Title of Award (if any)				
Name of Awarding Body				
Have you completed the programme?	Yes	No 🗌	Yes 🗌	No 🗌
If 'No' please indicate				
Period Completed to Date:				
Date on which Final Results will be available:				
Level/Class of Award				
Main subject areas studied, with marks or grades obtained; continue on a separate sheet if necessary.				

		ROFESSIONAL DISTINCTIONS AND C e a separate sheet and enclose with app		NG EDUCATION.	
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	YMENT SINCE LEAVING FULL-T	TIME EDUCATION IN CHRONOLOGICA	AL ORDE	R BEGINNING WIT	TH
	Name and Address of Employer	Capacity in which you were employed	From	Dates To	
			1.10		
NED	AL INFORMATION				
y dic		rou are applying for, and which type of ca e?	areer or oc	ccupation do you ho	ope
/e yo	ou any work experience in this area	i? If so, give brief details.			
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	tributes or characteristics do you fe	eel you have which make you particularly	suitable f	or this career or	

It is not a mandatory requirement for an applicant to disclose their disability if they do not wish to do so. However, where a student chooses to disclose their disability, it is advisable to notify the DCU Disability Service on acceptance of a programme place so as to enable the Disability Service to provide reasonable supports to the student during their time at DCU. No applicant will be disadvantaged as a result of disclosing information pertaining to a Medical Condition/Disability. Intending applicants may contact the disability service on tel: +353 (01) 7005927 or email: disability.service@dcu.ie for further information.

REFEREE CONTACT DETAILS: (The Registry will stated otherwise.)	assume permission to conta	act referees unless an applicant has
Name of Referee	Name of Referee	
Position in organisation	Position in organisation	
Address	Address	
Tel.No		
DECLARATION:		
I certify that the information given in this application of Dublin City University, to observe and comply with		
Signature of Applicant:		Date:
Return the completed application form, ensuring necessary supporting documentation and the ap applicants/€60 for non-EU applicants) by cheque Non-EU Students only: Non-EU Undergraduate Ad Campus, Dublin City University, Drumcondra, Dublin	propriate (non-refundable e, postal order or bank-dra Imissions, International Offic) application fee (€35 for EU it as follows:
All others: Student Enrolment, The Registry, Dublin	n City University, Dublin 9.	
REMIN	NDER CHECKLIST:	
Certified copies of original transcripts of result Copies must be stamped by conferring university.		originals
2. Application fee (€35 for EU applicants/€60 for	r non-EU applicants)	
3. Photocopy of Birth Certificate		
Non-EU applicants (Where Applicable)		
Evidence of competency in the English	language	
Certified translation into English of resu	ults/qualifications	

Transfer Applicants Existing DCU/Applicants from Incorporating Institutions:

Please tick as appropriate:
I am a $1^{st} \square 2^{nd} \square 3^{rd} \square$ year student. My student ID number is:
I am seeking a transfer into: $1st \square$ (Applicants from Incorporating Institutions only) $2nd \square 3rd \square year$ of a programme within the same faculty \square within another faculty \square
Please note that students who have been asked to officially withdraw, or who withdraw of their own volition, from DCU cannot avail of the Internal Transfer Process.
I have passed all semester 1 assessments / examinations.
I have passed all semester 2 assessments / examinations.
I have met the specific programme entry requirements for my proposed programme.
I have received permission from the two Chairs concerned for this transfer and have obtained their signatures on this form.
I have also provided them with a copy of my current transcripts and these are also attached. (DCU students can download their transcripts from the link on your portal page free of charge.)
If you have answered yes to all the above, please return this form to the Registry with the fee of $\ensuremath{\mathfrak{c}}35$ to reach us no later than 1^{st} July.
Special Note: If you are applying to transfer into the 1st year of the Bachelor of Education programmes (DC002/DC003/DC004) you MUST also meet the CAO points for the programmes.

Chairpersons of Programme Boards

As Chairperson of the	Programme Board,				
From which the transfer is sought, I certify that the Standing Committee of this Programme Board has agreed as not agreed to this transfer (tick as appropriate).					
In the event that the request is not granted please indica	te the grounds for refusal:				
Signed:D					
As Chairperson of the	Programme Board,				
has not agreed to this transfer (tick as appropriate)	ding Committee of this Programme Board ¹ has agreed Ident and confirm that they have met the programme entry				
Other criteria (e.g. availability of places on programme):				
Year being offered: Year $1 \square$ Year $2 \square$ Year $3 \square$					
Exemptions					
I certify that the FTLC Committee of this Programme E has not agreed to granting exemptions (tick as app					
Please list module codes for approved module exemption	ons:				
Signed:D	Date:				
Dublin City University is not responsible and shall not be bound be right to revise, amend, alter or delete programmes of study and accept by giving such notice as may be determined by Academic Council	·				
<u>Data Protection Notice</u>					
•	a submit to Registry in connection with any service provision will ion Notice, which can be viewed at the following website tice.shtml				

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