

Postgraduate Studies Application Form for <u>Taught</u> Postgraduate Programmes

- Do <u>not</u> use this application form for research postgraduate degrees (i.e. PhD, Structured PhD, or MA by research)
- All questions must be answered. Where appropriate, please put "none". Do not leave blanks or put dashes.
- Insert photograph in the box provided
- To be completed by typing using **BLACK** font

Please email completed application form academic transcripts to: Email: TaughtProgrammes@mic.ul.ie						

1 APPLICATION TO UNDERTAKE STUDY LEADING TO THE A

Grad Dip Taught MA

2 TITLE OF COURSE APPLIED FOR

Full-time Part-time

- 3a SURNAME
- 3b SURNAME (as on birth certificate if different from above)
- 3c FIRST NAMES IN FULL

(as on birth certificate)

- 4 STUDENT ID NUMBER (former MIC or University of Limerick students only)
- 5 PPS Number (Republic of Ireland students)
- 6 DATE OF BIRTH I IDENTIFY MY GENDER AS

DD / MM / YYYY

	(If your correspondence details cha must notify us immediately in writ email)						
	Telephone Number / Mobile Number						
	Email Address						
9	PERMANENT ADDRESS (or that of next of kin)						
	Telephone Number						
10	Have you paid the non-refur		APPLICA	TION FEE?	Yes	No	
	(please see MIC website for	aetalis)		Payment Re	ef ID:		
11	THIRD LEVEL EDUCATION						
	Names and Addresses	Years c	of study	Major areas of	Qualification	Class of	Level of
	of Institutions attended	from	to	Specialisation		Qualification*	Qualification**
	1	1	1	1			1

ADDRESS FOR CORRESPONDENCE

^{*} including terminal QCA for Mary Immaculate College/UL graduates.

^{**} Under the National Framework of Qualifications.

IMPORTANT NOTICE TO APPLICANTS WITH QUALIFICATIONS FROM INSTITUTIONS OTHER THAN THE UNIVERSITY OF LIMERICK. PLEASE ARRANGE TO HAVE THE FOLLOWING ORIGINAL MATERIAL EMAILED TO TAUGHTPROGRAMMES@MIC.UL.IE
 A transcript of your academic career to date from the Registrar of your university(s) (to include your final degree(s) results). Please note that MIC will offer <u>conditional</u> offers subject to submission of transcripts, where not available. Transcripts can be emailed to <u>TaughtProgrammes@mic.ul.ie</u> when they become available.
 Official results of examinations to be taken should be emailed to <u>TaughtProgrammes@mic.ul.ie</u> as soon as they are available.
Non-Irish graduates may be requested to forward syllabus and duration of undergraduate courses followed.
12 PARTICULAR ABILITIES (special aptitudes, knowledge of languages including computer languages)
12 DUDU CATION CAND DECEADOUINTEDECTO
13 PUBLICATIONS AND RESEARCH INTERESTS
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ve you previously a	pplied to MIC o	r UL to under	take Postgraduate Study? Yes No			
yes" state year and	specify progra	mme applie	d for and name(s) on application			
ase state how the Pedia, webpage, wo			your attention. Please be specific giving title of newspap specify).			

	ay mention any condition of health or disability which could have a bearing on your studies the provision of special facilities. You may use additional sheets if necessary.
· ·	articulars given in relation to this application are in all respects true and I agree to be bound a regulations of the University
SIGNATURE OF	APPLICANT
DATE	

At Mary Immaculate College, we treat your privacy seriously. Any personal data which you provide to the College will be treated with the highest standards of security and confidentiality, in accordance with Irish and European Data Protection legislation. To read the Direct Student Application Privacy Notice click here

FOR OFFICIAL USE ONLY

DOES THIS APPLICANT NEED TO BE (Please tick)

Interviewed	Accepted	Rejected	Pending
Yes No			

COMMENTS		

SIGNATURE DATE