



**Maynooth
University**
National University
of Ireland Maynooth

POSTGRADUATE STUDIES APPLICATION FORM

Please download and save a copy of this form. Alternatively, print and complete this form in BLOCK LETTERS using BLACK ink. Questions marked with an * are mandatory to all applicants.

Name (as you wish it to appear on all official university records)

Surname*:

First Names*:

Married name (if applicable)

Surname:

First Names:

Date of Birth*:

Day:

Month:

Year:

Gender*:

Male

Female

Mental Condition/Disability*:

Yes

No

If you have answered yes, please contact the Disability Support Service in Maynooth University by email access.office@nuim.ie or phone +353-1-708-6025 . It is not a mandatory requirement for an applicant to disclose information if they do not wish to do so. No applicant will be disadvantaged as a result of disclosing information pertaining to a medical condition and/or disability.

If yes, please state condition:

Home Address*:

Ireland

Other Country (please specify)

Correspondence Address*: Same as above Ireland

Other Country

Main Contact Number*:

Mobile:

Work Telephone:

Enter International Agent's details (if applicable)

International Agent's name:

International Agent's e-mail address:

Country of Nationality*:

PPS Number (only applicable to Irish Nationals):

Country of Birth:

Applicant's Current Status*:

Current Maynooth University Student

Maynooth University Graduate

Other Applicant

Maynooth University Student Number (if applicable):

Have you ever previously registered with Maynooth University?

Yes

No

If you have an additional Maynooth University Student Number, please provide:

Important note for sponsored applicants

If you are an approved Irish Aid Fellowship applicant and have a sponsor code from ICOS or have a sponsor code from International Office in Maynooth University. ICOS/Maynooth University will arrange payment of the application fee on your behalf.

ICOS/Maynooth University code*:

Postgraduate Programme Choice*:

Programme Code:

Preferred Level:

Preferred Major:

Details of Higher Education

Please indicate your primary degree which forms the basis of your consideration for this programme. Details of other awards should be posted separately.

Undergraduate Degree Title (English Translation if applicable):

Level/Class of Award:

If other please specify:

Name of institution attended:

If other please specify:

Address of institution attended:

Period of attendance:

From:

To:

Name of awarding body:

Main subjects studied:

Have you completed the programme?

Yes

No

If No, period completed to date:

Date on which final results will be available:

Professional/Industrial Experience

Give details of most recent relevant professional and/or industrial business experience. Details of other experience can be sent separately.

Period of employment:

Job title:

Level of responsibility:

Name of employer:

Address of employer:

References (indicate at least one)

Reference 1*

Name:

Position:

Phone:

Email:

Address:

Reference 2

Name:

Position:

Phone:

Email:

Address:

English Language Competency

Is the English language your primary language?*

Yes

No

If No, please state;

Examining Body:

If Other please specify:

Date of completion:

Day:

Month:

Year:

Score:

Please select ONE of the following categories

- I am a national of an EU member state/Ireland and will be ordinarily resident in an EU member state/Ireland for three of the five years prior to the commencement of the programme.
- I am a national of an EU member state/Ireland and have received all my post-primary education within an EU member state.
- I have been in full-time employment in an EU member state/Ireland for three of the last five years prior to the commencement of the first year of the course. This applies to me, as I am 23 years of age, or more, on the 1st January 2016.

I have been ordinarily resident in an EU member state/Ireland for three of the five years prior to the commencement of the programme and my parents have been in full-time employment in an EU member state for three of the five years prior to the commencement of the programme. This applies to me, as I am under 23 years of age on the 1st January 2016.

I do not fall under any of the categories outlined above.

Where did you first hear about the programmes?*

- | | |
|---|--|
| <input type="checkbox"/> Radio Alert | <input type="checkbox"/> Education Fair |
| <input type="checkbox"/> Newspaper/Magazine Advertisement | <input type="checkbox"/> Word of Mouth |
| <input type="checkbox"/> Cinema Advertisement | <input type="checkbox"/> International Agent |
| <input type="checkbox"/> Public Transport Advertisement | <input type="checkbox"/> Social Media |
| <input type="checkbox"/> Poster | <input type="checkbox"/> Other |
| <input type="checkbox"/> Web | If Other, please specify: |

Supporting Documents Checklist

The documents listed below are requested by Maynooth University to support your application. These can be uploaded now at application stage or at a later time via Application Status.

General Documentation for all programmes

- | | |
|---|---|
| <input type="checkbox"/> Birth Certificate/copy of Passport | <input type="checkbox"/> Personal Statement |
| <input type="checkbox"/> General (not compulsory) | <input type="checkbox"/> Result Transcript |

Declaration

I certify that the information given in this application is correct and I hereby undertake, if admitted as a student member of Maynooth University, to observe and comply with all the regulations of the University.

Signature of Applicant:

Date:

Return the completed application form, ensuring that you have signed the declaration above together with the necessary supporting documentation and the appropriate (non-refundable) application fee of €40 by bank deposit.

Please submit the completed application form to educoapps@maynoothuni.ie.