

## 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](mailto:registry@dcu.ie); Telephone: +353-(0)1-700 5338; Fax: +353-(0)1-700 5504; DCU Web; <http://www.dcu.ie/registry/applications.shtml>

<input type="checkbox"/>	<p><b>Applicants presenting Non-EU School Leaving Qualifications</b> for full-time/part-time undergraduate degree programme. Closing date for submission of applications is <b>1<sup>st</sup> July</b>. (Please note that Non-EU applicants applying for the B.Sc. in Nursing (4 year degree) must apply through the Central Applications Office (<a href="http://www.cao.ie">www.cao.ie</a> by 1<sup>st</sup> February).</p> <p><i>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 <b>Non-EU Undergraduate Admissions, International Office, Dublin City University, Dublin 9, Ireland.</b></i></p>
<input type="checkbox"/>	<p><b>Transfer applicants from another Higher Education Institution</b> – Closing date for submission of applications is <b>01<sup>st</sup> July</b>. For further information, please refer to, <a href="http://www4.dcu.ie/registry/transfer.shtml">http://www4.dcu.ie/registry/transfer.shtml</a> <b>Please note that transfer to final year of some programmes is restricted.</b> (FETAC Level 5 applicants must apply through the CAO by 1<sup>st</sup> February).</p> <p><i>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 <b>Admissions Office, Registry, Dublin City University, Dublin 9.</b></i></p>
<input type="checkbox"/>	<p><b>DCU Internal Transfer:</b> For existing DCU students who want to apply for entry to any year <b>other than year 1</b> of a programme. Closing date for applications is <b>1st July</b>. <b>Please note that transfer to final year of some programmes is restricted. See page 6 for details/requirements.</b></p> <p><i>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 <b>Admissions Office, Registry, Dublin City University, Dublin 9.</b></i></p>

**Note:**

- Transfers, both internal and Direct 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.

**Please complete this form in BLOCK LETTERS using BLACK ink. All questions must be answered. DO NOT leave blanks.**

Surname: \_\_\_\_\_ First Name(s): \_\_\_\_\_

**NAME AS ON BIRTH CERTIFICATE** (if different from above):

Surname: \_\_\_\_\_ First Name(s): \_\_\_\_\_

**DATE OF BIRTH:**    \_\_\_ / \_\_\_ / \_\_\_

**GENDER:**    Male     Female

**CITIZENSHIP:** \_\_\_\_\_

**COUNTRY OF BIRTH:** \_\_\_\_\_

**PPS NUMBER (If applicable)** \_\_\_\_\_

**COUNTRIES OF RESIDENCE**

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



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:

<b>Institution Attended</b>		
<b>Period of Attendance</b>		
<b>Name of Programme</b>		
<b>Duration of Programme</b>		
<b>Full-Time or Part-time</b>		
<b>Title of Award (if any)</b>		
<b>Name of Awarding Body</b>		
<b>Have you completed the programme?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>If 'No' please indicate</b>		
<ul style="list-style-type: none"> <li>• <b>Period Completed to Date:</b></li> <li>• <b>Date on which Final Results will be available:</b></li> </ul>		
<b>Level/Class of Award</b>		
<b>Main subject areas studied, with marks or grades obtained; continue on a separate sheet if necessary.</b>		

**DETAILS OF OTHER ACADEMIC, PROFESSIONAL DISTINCTIONS AND CONTINUING EDUCATION:**  
 (if there is insufficient space please use a separate sheet and enclose with application)

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**EMPLOYMENT SINCE LEAVING FULL-TIME EDUCATION IN CHRONOLOGICAL ORDER BEGINNING WITH THE MOST RECENT:**

Name and Address of Employer	Capacity in which you were employed	Dates	
		From	To

**GENERAL INFORMATION**

Why did you choose the programme that you are applying for, and which type of career or occupation do you hope to pursue as a result of taking this programme?

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Have you any work experience in this area? If so, give brief details.

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What attributes or characteristics do you feel you have which make you particularly suitable for this career or occupation? : \_\_\_\_\_

Other information deemed relevant to the application: \_\_\_\_\_

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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](mailto:disability.service@dcu.ie) for further information.

**REFEREE CONTACT DETAILS:** (The Registry will assume permission to contact referees unless an applicant has stated otherwise.)

Name of Referee _____	Name of Referee _____
Position in organisation _____	Position in organisation _____
Address _____	Address _____
_____	_____
_____	_____
Tel.No. _____	Tel.No. _____

**DECLARATION:**

I certify that the information given in this application is correct and I hereby undertake, if admitted as a student member of Dublin City 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 (€35 for EU applicants/€60 for non-EU applicants) by cheque, postal order or bank-draft as follows:**

**Non-EU Students only:** Non-EU Undergraduate Admissions, International Office, Dublin City University, Dublin 9, Ireland.

**All others:** Student Enrolment, The Registry, Dublin City University, Dublin 9.

**REMINDER CHECKLIST:**

1. Certified copies of original transcripts of results\_ Please do not send originals  
Copies must be stamped by conferring university
2. Application fee (€35 for EU applicants/€60 for 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 results/qualifications

## Transfer Applicants

### Existing DCU / Applicants from Incorporating Institutions:

Please tick as appropriate:

I am a 1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>  year student. My student ID number is: \_\_\_\_\_.

I am seeking a transfer into: 1st  (Applicants from Incorporating Institutions only) 2nd  3rd  year of a programme within the same faculty  within another faculty

**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.**

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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 €35 to reach us no later than 1<sup>st</sup> 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.

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### 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  has not agreed  to this transfer (tick as appropriate).

In the event that the request is not granted please indicate the grounds for refusal:

\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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As **Chairperson** of the \_\_\_\_\_ Programme Board,

**to which the transfer is sought**, I certify that the Standing Committee of this Programme Board<sup>1</sup> has agreed  has not agreed  to this transfer (tick as appropriate).

I have also reviewed the transcripts presented by the student and confirm that they have met the programme entry requirements.

\_\_\_\_\_

Other criteria (e.g. availability of places on programme): \_\_\_\_\_

**Year being offered:** Year 1  Year 2  Year 3

**Exemptions**

I certify that the FTLC Committee of this Programme Board<sup>2</sup> to which the transfer is sought has agreed  has not agreed  to granting exemptions (tick as appropriate).

Please list module codes for approved module exemptions:

\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Dublin City University is not responsible and shall not be bound by errors in or omissions from this publication; the University reserves the right to revise, amend, alter or delete programmes of study and academic regulations at any time by giving such notice as may be determined by Academic Council in relation to any such change.

**Data Protection Notice** : Personal information that you submit to Registry in connection with any service provision will be treated in accordance with the DCU Data Protection Policy which can be viewed at the following website address: [http://www4.dcu.ie/sites/default/files/iss/pdfs/DCU\\_Data\\_Protection\\_Policy.pdf](http://www4.dcu.ie/sites/default/files/iss/pdfs/DCU_Data_Protection_Policy.pdf) The University shall only process such information in line with the purpose for which you provide it and to the extent necessary to provide you with the information or service you require. The personal data may be disclosed to staff and agents of the University in order to support services to you. In addition, personal data may be disclosed to government departments, statutory bodies and funding agencies where this is required under legislation or for the provision of services. In order to ensure our records are correct we urge you to answer all relevant questions accurately. If your personal details should change please let us know so that we can update our records.

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