Age Friendly University Application to Register for DCU Audit and Credit Modules

Please complete this form if you wish to enroll on:

Accredited DCU (undergraduate) modules as part of the Age Friendly University initiative.
Application is made by:

- Completing this form, clearly indicating the required module and mode of attendance – audit (without exams/assignment or credit (with exams/assignment)
- Attaching a passport photo for your student ID card
- Providing proof of identity – current valid photo ID (passport – photocopy or picture of the document and attached to this form is acceptable)
- Paying the appropriate fee to the AFU Office
  (drafts/cheque/postal order made payable to AFU DCU D02055 10117)
- Submitting the form to the AFU Office before the commencement of Semester 2 lectures. Final date for payment Thursday 23rd January 2020.
- The Admissions Office in Registry, issue the student cards and will be in touch with you to collect a new card. If you already have a card, you do not need another student card.

- Do you hold an existing DCU Student Card Yes/No _____

- If Yes, please ender Student ID No. _____

Module and Mode of Attendance

1. Audit (Attendance only) €100

Module Code	Module Title	Semester	Attendance Type

2. Full Participation €500

Module Code	Module Title	Semester	Attendance Type

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

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.

DCU

APPLICANT DETAILS
PLEASE COMPLETE IN BLOCK CAPITALS

First Name: _____

Surname: _____

Address in Ireland: _____

_____

Telephone Number: _____   **Nationality:** _____

Email Address: _____   **Date of Birth:** _____

Mobile Number: _____   **Country of Birth:** _____

Home Address if different from above:

_____

_____

****

Next of kin details (to be contacted in case of emergency):

First Name: _____ **Surname:** _____

Address: _____

_____

Telephone Number: _____

Applicant 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: _____

![DCU logo]

To be completed by Registry Office:

Identification Checked   ☐

Existing Student Card Yes/No_____
Existing Student ID No._____
Name of Student: _____
Date Registered: _____
Card posted: _____

To be completed by Registry Office:

Registry Stamp:

Fee Paid by Applicant: Yes : No:

Online/Cheque / Postal

order /bank Draft

Credit/Card

Signature: _____