APPLICATION FOR REGISTRATION ON PROFESSIONAL DEVELOPMENT MODULE

NS 5058 – INFORMATICS & E-HEALTH

Name:	
Contact address:	
Next of Kin: Name & Contact Number:	
Professional Qualification/Role:	
Professional Registration Number if relevant:	
Telephone numbers (Mobile or Work):	
Email address:	
Date of birth:	
Period of registration at DCU:	2019-2020
Module for which you wish to register:	NS5058: Informatics & eHealth
If you are a current or past student of DCU, please supply your student ID Number and the degree for which you are/were registered:	

SIGNED: ……………………………………………………………………………………………………… (APPLICANT)
PLEASE RETURN THIS FORM WITH A CURRICULUM VITAE, **ONE** PASSPORT PHOTOGRAPH AND ONE FORM OF IDENTIFICATION (SEE OVERLEAF) TO THE ADDRESS BELOW:

Faculty of Science & Health, HG04, Nursing Building, Dublin City University, Dublin 9

T **+353 1 7008975** | E **science@dcu.ie**

Information on this application will only be shared with the co-ordinator of this module for the purpose of this course only.

For details of the University's data privacy policy, visit; www.dcu.ie/sites/default/files/policy/25_-_data_privacy_policy_v3.pdf

One of the following forms of identification should accompany your application for this module:

1.   Current valid passport (from country of citizenship) **OR**

2.   Irish Driving Licence or Learner Permit (new credit card format) **OR**

3.   Birth Certificate with National Age Card issued by An Garda Siochána Photo ID **OR**

4.   Garda National Immigration Bureau (GNIB) card **OR**

5.   National Identity Card for EU / EEA / Swiss citizens **OR**

6.   Irish Public Services Card

7.   Form NVB1 Vetting Invitation - only applies to programmes where Vetting is a requirement.