



**Age-Friendly University
Application to Register for
DCU Accredited Modules
2024 Semester 2**

Please complete this form if you wish to enrol on:

A DCU (undergraduate) module 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 or Credit.
- Electronically attaching a passport photo of your student ID card (not necessary if you already have a student ID from the previous year).
- Providing proof of identity – current valid photo ID (passport/driving licence) (not necessary if you already have a student ID from the previous year).
- Paying the appropriate fee to the AFU Office via Eventbrite.

Module and Mode of Attendances

1. Audit only (no exams or assignments) €120

Module Code	Module Title	Semester 2	Attendance Type AUDIT

2. Credit Bearing (complete all exams and assignments) €520

Module Code	Module Title	Semester 2	Attendance Type CREDIT

Date Protection Notice

Personal information that you submit to Registry in connection with any service provision will be treated in accordance with the DCU Protection Policy which can be viewed at the following website address: <https://www.dcu.ie/registry/data-protection-notice-registry>

Dublin City University is not responsible and shall not be bound by errors in our 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.



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:	

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:** _____

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.



To be completed by Registry Office:

Identification Checked

Name of Student:

Student Card No: _____

Date Registered:

Card posted:

To be completed by Registry Office:

Registry Stamp:

Fee Paid by Applicant: Yes:

Processed by AF Office

Auth Code:

Signature: