



University Use Only

**RE-ADMISSION: DIRECT APPLICATION FORM**

Applicants who are former students of Dublin City University (or its incorporated Colleges where DCU accredited awards were granted) seeking re-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; DCU Web; <http://www.dcu.ie/registry/applications.shtml>

<input type="checkbox"/>	<p><b><u>CATEGORY 1</u></b></p> <p>Former students who are re-applying to their previous programme of study, where the last year of registration exceeds eight years. Exemptions for modules already completed may be, approved by the University post-entry. Further information can be, sought from the Programme Chairperson. <b>Closing date for submission of applications is 1<sup>st</sup> July.</b></p>
<input type="checkbox"/>	<p><b><u>CATEGORY 2</u></b></p> <p>Former students who are applying for re-admission to another programme, as their previous programme is no longer running. Entry is subject to meeting entry requirements of the new programme. <b><u>Please ensure to complete Section C of this form.</u></b> Exemptions for modules already completed may be, approved by the University post-entry. Further information can be, sought from the Programme Chairperson.</p>
<input type="checkbox"/>	<p><b><u>CATEGORY 3</u></b></p> <p>Former students who are applying for re-admission to a programme, which is no longer running. Students can request to exit from their programme with a lesser alternative award by downloading and completing a R42 form, from the following link <a href="http://www.dcu.ie/registry/applications.shtml">http://www.dcu.ie/registry/applications.shtml</a> and submitting it along with this form to Registry.</p>

**SECTION A – BIOGRAPHICAL**

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

**NAME (AS ON DCU RECORD):**

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

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

GENDER: Male  Female 

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

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

**COUNTRIES OF RESIDENCE**

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

Country:	From: MM/YY	To: MM/YY



**SECTION C – SCHOOL EDUCATION RECORD**

**Please complete this section if you are Category 2 applicant**

**SECONDARY SCHOOL EDUCATION**

Name and Full Postal Address

Dates of Attendance

(i) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

from \_\_\_\_\_ to \_\_\_\_\_

**FINAL SCHOOL LEAVING EXAMINATION RECORD**

(Please ensure that an official certificate of results is included. A certified translation into English must, be provided

<b>Date of Attendance:</b>	<b>Address of School:</b>

<b>Subjects Taken:</b>	<b>Results:</b>

**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.

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


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

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)**

**(Payment can be made via the following link at DCU Online Payment Portal)**

<https://dcu.sybarnetsps.ie/dcupayments/dcu/> When making the payment, please provide name, phone number and email address. Please choose Registry - Direct Application (R11) - €35EU/€60 Non EU in the drop down menu under "payment category") Please include payment reference number on the form.

**Non-EU Students only:** by email to [international.office@dcu.ie](mailto:international.office@dcu.ie)

**All others:** Student Enrolment by email to [ugadmissions@dcu.ie](mailto:ugadmissions@dcu.ie)

**SECTION D**

**Chairpersons of Programme Board**

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

I certify that the Standing Committee of this Programme Board has agreed  has not agreed  to this re-admission.

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

\_\_\_\_\_

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

.....

**FOR CATEGORY 2 STUDENTS** - I have also reviewed the transcripts presented by the student and confirm that they have met the programme entry requirements to transfer onto this programme as their previous programme is no longer offered.

\_\_\_\_\_

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

List of modules to be taken by the student to fulfil the programme learning outcomes and indicate the number of credits to be obtained


**Conditions attached to this re-admission request, if any** \_\_\_\_\_

**Approved date of re-entry to programme:** \_\_\_\_\_

**Proposed maximum completion time for programme:**

**Exemptions**

I certify that the FTLC Committee of this Programme Board to which the re-admission is sought has

agreed  has not agreed  to granting exemptions (tick as appropriate).

Please list module codes for approved module exemptions:


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 Registry Data Protection Notice, which can be viewed at the following website address: <https://www.dcu.ie/registry/data-protection-notice.shtml>

**REMINDER CHECKLIST:**

1. **Certified copies of original transcripts of results\_ Please do not send originals  
Copies must be stamped by conferring university**
  2. **Paid online & Payment reference (€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**