



Bachelor of Arts, Early Childhood Studies and Practice

Application Form 2011 - 2012

Please attach a signed passport photograph

- All questions must be answered. Where appropriate please write 'none'. Do not leave blanks or use dashes.
- To be written in BLOCK LETTERS using BLACK ink.
- Completed Application Forms should be returned on or before Friday, 3rd June 2011 to:
Programme Administrator,
BA in Early Childhood Studies and Practice
Adult and Continuing Education Office,
National University of Ireland, Galway

Personal Details

Have you previously studied at NUI Galway? Yes No
If yes please state the last year you were a registered student.

Surname _____ First name(s) _____

Female Male Date of birth (dd/mm/yyyy) _____

Country of birth _____ Nationality _____ PPS No. _____

E-mail address *Please write clearly* _____

Home Address _____

Address for Correspondence
Please ensure you are contactable at this address at all times

Telephone Numbers
Work _____ Home _____ Mobile _____

How did the course come to your attention?

Particular Student Needs
Access (wheelchair access, etc.) Learning Supports (Dyslexia etc.) Other
Please provide details

Fee Details

Payment of Fees Please tick a) Personal Funds b) Sponsorship (e.g. Employer, voluntary body etc.)

If your sponsor is funding or part-funding your participation on this programme, please provide complete contact details in section below.

Sponsor or sponsor organisation

Contact name

Postal address

Contact telephone number

Employment History

SECTION A Details of Current Employer

Name

Position Held

Date Employment Commenced

SECTION B Details of Previous Employers *Past ten years*

Name/Address	Dates of Employment From - To	Position Held



Personal statement

Please enclose a typed personal statement, of no more than 500 words, explaining why you wish to apply for this programme of study. Please outline how this course will be of benefit to you in your employment.

Previous Education and Training

Previous Qualifications

Please outline any previous qualifications that you have achieved e.g. Degrees, HETAC/FETAC qualifications, any other relevant certificates, etc)

Institution	Title of qualification	Years of Study From/To

Second level

Last examination taken

Year

Subjects	Higher / Ordinary Level	Grade



Application Details

I acknowledge that the particulars given in relation to this application are in all respects true.

Signed: _____

Date: _____

Checklist

- Fully Completed Application Form
- A signed Passport Photo
- €500 deposit or completed sponsorship form
- Applicants under 21 years of age must forward copies of Leaving Certificate or any other examination results noted on application form.
- Personal Statement
- Copy of Birth Certificate
(If you wish to register in a married name, copy of marriage certificate)
- International Language Testing System (ILTS) certificate/TOFEL
(For applicants whose first language is not English)

Application forms should be returned on or before Friday 3rd June, 2011 to the Programme Administrator, Adult and Continuing Education Office, National University of Ireland, Galway.

Please enclose this itemised documentation to allow your application to be processed.

Recognition of Prior Learning (RPL)

Applicants who wish to be considered for exemptions must complete the Recognition of Prior Learning Application form available from the programme co-ordinator. Applications for RPL cannot be considered after registration.

For Official Use Only

Office Notes:

Payment Enclosed Yes No

Bank Draft Amount _____

Postal Order Amount _____

Sponsorship Letter Enclosed Yes No