

USA Student Application Form

Application refers to the Academic Year

____/ ____

Attach passport size photo

APPLICATION PROCEDURES

CHECKLIST: Please tick boxes to ensure that requested documentation is enclosed with this completed application form.

- 1. Complete application form, with examination records certified by college authorities, attested photocopies of all additional educational qualifications already obtained and English language translations of qualifications not issued in English. Please do not submit original documents, as any documentation submitted will not be returned.
- 2. Photocopy of original passport or birth certificate.
- 3. Any other relevant information regarding qualifications or previous work experience.

PLEASE NOTE

It is the applicant's responsibility to ensure that all the above documents reach the International Office, Galway-Mayo Institute of Technology before **15th May** for entry to programmes commencing in September each year.

The Institute reserves the right to cancel, suspend or modify courses at any time.

For further information please contact:International Office, GMIT, Dublin Road, Galway, IrelandTel: +353 91 742456Fax: +353 91 751107email: erasmus@gmit.ie

Web: www.gmit.ie

Please note: This application form must be typed and not hand written

PLEASE INI	DICATE THE PROGRAMME(S) FOR WHICH YOUR APPLICATION IS BEING MADE:	Year
Programme	1	
	2	
	3	

PERSONAL DETAILS				
Family Name		First Names		
Home Address		Address for C	Correspondence (if diffe	erent)
		Home Tel No		
Title (Mr\Mrs\Ms. etc)		Contact Tel N	lo.	
Date of Birth		Email		
Place of Birth		Nationality		
Male Female		Marital Statu	s	
Parents/Guardians Names				
SECONDARY EDUCATION Please enter details of all secondary s	schools, high schools or equ	uivalent you ha	ave attended with date	s.
Name and Address of School	Examinations Passes	Su	bjects and Grades	Dates: From – To

DETAILS OF THIRD LEVEL EDUCATION		
Full Title of Third Level Qualifications		
Name of Awarding Body		
Name and Address of College Attended		
(Or Currently attending)		
Date From	Date To	

DETAILS OF THIRD LEVEL EDUCATION (contd.)			
Overall Result		Date of Award	
Average in Final Year Examinations (%)			
Subject Studied	Exam Results	Subjects Studied	Exam Results
Applicants who do not have examinatio			

opportunity.

If you have not finished a programme of study at an Academic Inst	itute, state reason(s) why:	
Have you ever been dismissed from an Academic Institute? If Yes, please explain why:	Yes	No

DECLARATION

I certify that the information given in relation to this application is correct. If my application is accepted, I undertake to observe the Institute's regulations and to ensure payment of fees.			
Signed	Date		
FOR OFFIC	E USE ONLY		
Offer Place	No Offer		
Provisional offer subject to			
Signed (Head of Department)	Date		

Module Registration Form

Programme Title:

Year:

Student Name		Student ID Number: (office use only)		
Module Code	Module Title		Credits	

Student's signature:

Date:

Printed name (block capital letters):

Home College: Head of Department Signature:

GMIT Head of Department Signature:

Date:

Date: