

A detailed photograph of the central tower of Trinity College Dublin, showing its ornate architecture, domes, and archway.

TRINITY COLLEGE DUBLIN

DIRECT ENTRY APPLICATION FORM

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The application form must be completed in full and accompanied by the relevant documentation.

Please indicate documents enclosed.

1. Certified true copy* of final second level qualifications.
2. Certified true copy* of IELTS, Cambridge Advanced/Proficiency, TOEFL scores for applicants whose first language is not English.
3. Certified true copy* of academic transcripts for each year of third level study **and** of all third level qualifications awarded.
4. A current Curriculum Vitae, with full details of your work/study for the past 3 years.
5. Application fee and application fee payment form.

** A certified true copy is a photocopy of the original that has been signed and stamped by a member of an Garda Síochána, a school principal or other official.*

Please note that incomplete applications cannot be considered.

An application submitted without the necessary documentation will be returned.

It is the practice of the University to destroy all documents relating to unsuccessful applications to undergraduate programmes at the end of Michaelmas Term. Unsuccessful applicants who wish to receive feedback on their application are required to make a written request to the University prior to this date.

Student No. office use only

DIRECT ENTRY APPLICATION FORM

Complete this form using BLOCK CAPITAL LETTERS AND BLACK LETTERING

SECTION 1: PERSONAL DETAILS

| | | | | | | | | | | | | | | | |
|--------------------------------------|--|-----|--|---|--------------------------|---|--------------------------|---------------------------------------|--|-----|-------|------|--|--|--|
| SURNAME | | | | | | | | | | | | | | | |
| OTHER NAME(S) (IN FULL) [†] | | | | | | | | | | | | | | | |
| TITLE: MR/MS ETC. | | SEX | | F | <input type="checkbox"/> | M | <input type="checkbox"/> | DATE OF BIRTH | | DAY | MONTH | YEAR | | | |
| COUNTY/COUNTRY OF BIRTH | | | | | | | | NATIONALITY | | | | | | | |
| ADDRESS FOR CORRESPONDENCE | | | | | | | | PERMANENT HOME ADDRESS (IF DIFFERENT) | | | | | | | |
| DAY TELEPHONE NO: | | | | | | | | EVENING TELEPHONE NO: | | | | | | | |
| FAX: | | | | | | | | EMAIL: | | | | | | | |

[†] Do not use initials when completing the section Other Name(s)

| | | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|----------------------|----------------------|----------------------|--------------------------|--------------------------|--------------------------|----------------------|
| PERSONAL PUBLIC SERVICE NUMBER (PPS NO.) | | | | | | | | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| HAVE YOU STUDIED AT TRINITY COLLEGE BEFORE? | | | | | | | | | | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | |
| IF YES, PLEASE GIVE YOUR STUDENT NUMBER | | | | | | | | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | |
| IF YOU HAVE A DISABILITY OR SPECIFIC LEARNING DIFFICULTY PLEASE TICK THIS BOX | | | | | | | | | | | | <input type="checkbox"/> | | |

The College will try, as far as possible, to meet the needs of students with a disability. If you have a disability or specific learning difficulty you are invited to inform the College. More detailed information may be sought at a later date. This information will not in any way prejudice or favour your application.

SECTION 2: COURSES

List the courses for which you wish to be considered in order of preference.

| ORDER OF PREF. | COURSE TITLE | PROPOSED YEAR OF ENTRY 1ST, 2ND OR 3RD YEAR |
|----------------|--------------|--|
| 1 | | |
| 2 | | |
| 3 | | |

Applicants may be offered a place at a level other than that for which they have applied.

SECTION 3: EDUCATION

3.1 SECOND LEVEL

School Code of last second level school attended (for applicants who attended school in Ireland only). See Leaving Certificate/A Level statement of results or contact school.

| NAME AND ADDRESS OF SECOND-LEVEL SCHOOL | FROM | TO |
|---|------|----|
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SECTION 3.2 SECOND LEVEL EXAMINATIONS

Give details only of the highest second level qualification attained. If you are taking examinations this year please indicate the subjects and the level you are taking.

A certified true copy of the results certificate must be included with your completed application.

| NAME OF EXAMINATION BOARD/AUTHORITY | DATE OF EXAMINATION | SUBJECTS | NUMBER OF YEARS OF STUDY | LEVEL (LEAVING CERTIFICATE HIGHER/ORDINARY GCSE/A LEVEL ETC.) | GRADE ACHIEVED (IF COMPLETED) |
|-------------------------------------|---------------------|----------|--------------------------|---|-------------------------------|
| | | | | | |

SECTION 3.3 THIRD LEVEL

Give details of all certificate, diploma, ordinary degree or higher degree qualifications that have been awarded.

A certified true copy of academic transcripts for each year of study and of qualification certificates must be included with your completed application.

| NAME AND ADDRESS OF INSTITUTION(S) ATTENDED | YEARS OF STUDY FROM: TO: | COURSE TITLE AND LEVEL OF AWARD | QUALIFICATION AWARDED (DIPLOMA, DEGREE, ETC.) | REASON FOR LEAVING (GRADUATED, WITHDREW, ETC.) |
|---|--------------------------|---------------------------------|---|--|
| | | | | |
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SECTION 3.4 CURRENT STUDIES

Give details of any diploma, ordinary degree or higher degree courses you are currently attending but have not yet completed.

A certified true copy of academic transcripts to date must be included with your completed application for each year of study to date.

| NAME AND ADDRESS OF INSTITUTION ATTENDED | YEAR STUDY COMMENCED AND DATE OF COMPLETION | COURSE TITLE AND LEVEL OF AWARD | NUMBER AND TITLE OF ASSIGNMENTS COMPLETED | AVERAGE RESULT |
|--|---|---------------------------------|---|----------------|
| | | | | |

SECTION 3.5 NON-CERTIFIED COURSES

Give details of relevant non-certified or extra mural courses you have completed or are currently attending.

| COURSE TITLE | NAME AND ADDRESS OF INSTITUTION ATTENDED | AVERAGE RESULT |
|--------------|--|----------------|
| | | |

SECTION 3.6 ENGLISH LANGUAGE QUALIFICATIONS

If English is not your first language you must provide evidence of English language competence. Certified true copies of results certificates must be included with your completed application.

| | SCORE | MINIMUM |
|--------------------------|-------|---|
| TOEFL | | INTERNET BASED: 90 (WITH A WRITTEN SCORE OF 21) PAPER BASED: 570 (WITH A TWE SCORE OF 4.5) |
| IELTS (ACADEMIC VERSION) | | 6.5 (NO INDIVIDUAL BAND BELOW 6) |
| CAMBRIDGE ADVANCED | | A |
| CAMBRIDGE PROFICIENCY | | C |
| OTHER (PLEASE STATE) | | |

SECTION 4: ADDITIONAL INFORMATION

Use the space below to include any additional information you feel relevant to your application (e.g. other courses attended, training/professional development, voluntary work).

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HOW WILL THE PROPOSED COURSE OF STUDY AT TRINITY COLLEGE SUPPORT YOUR CAREER OBJECTIVES?

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HOW AND WHEN DID YOU FIRST HEAR OF THE COURSE(S) FOR WHICH YOU ARE NOW APPLYING?

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CERTIFICATION

I certify that the information given in this application is complete and accurate to the best of my knowledge and understand that any misrepresentation may render my application void. I understand that this application and supporting documents become the confidential property of Trinity College and will not be released to another party.¹

APPLICANT'S SIGNATURE:

DATE:

This application is an expression of interest in the undergraduate course(s) for which you have applied. It does not constitute a contract between the applicant and the University.

¹ Information supplied on this form will be used for compiling general statistical reports and will not identify any individual applicant.



Completed application forms should be returned to:

The Admissions Office, West Theatre
Trinity College, Dublin 2

Telephone: 00 353 (0)1 896 4444

Fax: 00 353 (0)1 872 2853

Email: admissions@tcd.ie

Website: www.tcd.ie

PLEASE NOTE THAT INCOMPLETE APPLICATION FORMS CANNOT BE ASSESSED
AND WILL BE RETURNED FOR COMPLETION PRIOR TO THEIR CONSIDERATION