



# UNIVERSITY OF DUBLIN

## Trinity College

### MATURE STUDENT SUPPLEMENTARY APPLICATION FORM

You are advised to consult the accompanying Guidelines when completing this form

#### SECTION 1: PERSONAL DETAILS (see page 7 of accompanying Guidelines)

##### 1.1 CONTACT DETAILS

SURNAME														
OTHER NAME(S) (IN FULL)														
TITLE: MR/MS ETC.					GENDER F <input type="checkbox"/> M <input type="checkbox"/>									
ADDRESS FOR CORRESPONDENCE										PERMANENT HOME ADDRESS (IF DIFFERENT)				
TELEPHONE (DAY)										TELEPHONE (EVENING)				
EMAIL										FAX				
PPS NUMBER					CAO NUMBER									

##### 1.2 DATE OF BIRTH

All applicants **must be 23 years of age on 1st January of the year in which you wish to start study** (see page 7 of accompanying Guidelines)

DATE OF BIRTH	DAY	<input type="text"/>	MONTH	<input type="text"/>	YEAR	<input type="text"/>
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##### 1.3 EU STATUS

All applicants **must have EU status** (see page 2 of accompanying Guidelines)

NATIONALITY	EU STATUS	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you resided in Ireland for three out of the past five years?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

#### SECTION 2: COURSES

##### 2.1 COURSE CHOICES

List the courses for which you wish to be considered in order of preference. If you are applying for a two-subject moderatorship combination under course title you must enter **both subjects on the same line** (see page 8 of accompanying Guidelines)

COURSE CODE	COURSE TITLE
TR	
TR	
TR	

## SECTION 3: EDUCATION

### 3.1 SECONDARY EDUCATION (if applicable)

Give details of the highest second level qualifications you were awarded (see page 9 of Guidelines)

QUALIFICATION	SUBJECTS (INCLUDE LEVEL TAKEN)	MARK/GRADE
NAME AND ADDRESS OF SCHOOL (INCLUDING COUNTRY)		
DATES: FROM - TO		

### 3.2 POST SECOND LEVEL EDUCATION: CERTIFICATE(S), DIPLOMA(S) OR DEGREE(S) (if applicable)

Give details of certificate, diploma or degree qualifications you were awarded (see page 9 of Guidelines)

1. COURSE TITLE	SUBJECTS (INCLUDE LEVEL TAKEN)	MARK/GRADE
NAME AND ADDRESS OF INSTITUTION		
DATES: FROM - TO		
FINAL OVERALL GRADE AWARDED		
2. COURSE TITLE	SUBJECTS (INCLUDE LEVEL TAKEN)	MARK/GRADE
NAME AND ADDRESS OF INSTITUTION		
DATES: FROM - TO		
FINAL OVERALL GRADE AWARDED		

### 3.2 POST SECOND LEVEL EDUCATION (CONT.)

3. COURSE TITLE	SUBJECTS (INCLUDE LEVEL TAKEN)	MARK/GRADE
NAME AND ADDRESS OF INSTITUTION		
DATES: FROM - TO		
FINAL OVERALL GRADE AWARDED		

### 3.3 CURRENT STUDIES: CERTIFICATE, DIPLOMA OR DEGREE COURSES (if applicable)

Give details of courses you are undertaking currently but have not yet completed

COURSE TITLE	SUBJECT (INCLUDE LEVEL IF APPLICABLE)	NUMBER OF ASSIGNMENTS COMPLETED	AVERAGE RESULT
NAME AND ADDRESS OF INSTITUTION			
DATES: FROM – TO			

### 3.4 NON-CERTIFICATE COURSES (if applicable)

Please give details of relevant non-certificate/extra-mural courses you have completed or are currently attending, e.g. personal development, arts and crafts, creative writing, etc.

COURSE TITLE	NAME AND ADDRESS OF INSTITUTION	DATES: FROM - TO

### 3.5 ENGLISH LANGUAGE PROFICIENCY (if applicable)

If English is not your first language you must provide evidence of English language competence.

Please give details of the English language qualification(s) you hold and submit the certificate with your application (see page 6 of accompanying Guidelines)

EXAMINATION	GRADE
TOEFL	
CAMBRIDGE PROFICIENCY	
CAMBRIDGE ADVANCED	
IELTS	
PEARSONS	
OTHER	

## SECTION 4: EMPLOYMENT

Give details in **chronological order** of **relevant** work experience (see page 10 of accompanying Guidelines)

	IN THE SPACE BELOW OUTLINE YOUR RESPONSIBILITIES, THE SKILLS YOU USED AND/OR EXPERIENCE YOU GAINED WHILE WORKING IN EACH POSITION LISTED.
1. JOB TITLE	
NAME AND ADDRESS OF COMPANY/ORGANISATION	
DATES: FROM - TO	
2. JOB TITLE	
NAME AND ADDRESS OF COMPANY/ORGANISATION	
DATES: FROM - TO	
3. JOB TITLE	
NAME AND ADDRESS OF COMPANY/ORGANISATION	
DATES: FROM - TO	
4. JOB TITLE	
NAME AND ADDRESS OF COMPANY/ORGANISATION	
DATES: FROM - TO	

## SECTION 5: ACTIVITIES OTHER THAN EDUCATION OR EMPLOYMENT

### 5.1 VOLUNTARY WORK (if applicable)

Give details in **chronological order** of any voluntary (**unpaid**) work you have carried out (see page 10 of accompanying Guidelines)

	IN THE SPACE BELOW OUTLINE YOUR INVOLVEMENT AND HOW YOU BENEFITED FROM YOUR EXPERIENCE.
1. TITLE	
NAME AND ADDRESS OF ORGANISATION	
DATES: FROM - TO	
2. TITLE	
NAME AND ADDRESS OF ORGANISATION	
DATES: FROM - TO	
3. TITLE	
NAME AND ADDRESS OF ORGANISATION	
DATES: FROM - TO	

### 5.2 HOBBIES OR INTERESTS

Give details of your hobbies or interests

TYPE OF HOBBY/INTEREST	IN THE SPACE BELOW OUTLINE THE SKILLS USED AND/OR KNOWLEDGE OR EXPERIENCE GAINED FROM YOUR HOBBIES/INTERESTS.











## SECTION 8: CERTIFICATION

I have read and understood the Guidelines that accompany this application form and completed the checklist (see over).

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

SIGNATURE:	DATE:
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***This application is an expression of interest in undergraduate course(s) for which you have applied. It does not constitute a contract between the applicant and the University. It is the practice of the University to destroy all documents relating to unsuccessful applications to undergraduate programmes at the end of December, year of application. Unsuccessful applicants who wish to receive feedback on their application are required to make a written request to the University prior to this date.***

Forward your completed application and **the appropriate number of photocopies** to:

Admissions Office  
Trinity College  
Dublin 2

**Closing date:** 1st February<sup>2</sup>

<sup>1</sup> Information supplied on this form will be used for compiling general statistics/research and will not identify any individual applicant.

<sup>2</sup> Applicants should note that when the 1st February falls on a Saturday or a Sunday hand delivered applications will be accepted up to 5.00pm on the preceding Friday. Applications arriving by first post on the following Monday will be treated as having arrived on time.

## SECTION 9: CHECKLIST

For your application to Trinity College to be **complete** you must have:



RETURNED THE ORIGINAL APPLICATION FORM	YES <input type="checkbox"/>
INCLUDED THE REQUIRED NUMBER OF PHOTOCOPIES WITH YOUR ORIGINAL APPLICATION FORM. YOU ARE REQUIRED TO INCLUDE A PHOTOCOPY OF THE FULL APPLICATION FORM <b>FOR EACH SUBJECT/COURSE</b> TO WHICH YOU HAVE APPLIED. THE NUMBER OF PHOTOCOPIES SHOULD BE THE SAME AS THE NUMBER OF PAGES COMPLETED IN SECTION 6	COPIES INCLUDED <input style="width: 50px;" type="text"/>
YOU ARE ADVISED TO TAKE A PHOTOCOPY OF THE APPLICATION FOR YOUR OWN RECORDS	
APPLIED TO THE CAO AS WELL AS TO TRINITY COLLEGE	YES <input type="checkbox"/>
STATED THE SAME TRINITY COLLEGE (TR) COURSES ON BOTH THE CAO AND TRINITY COLLEGE MATURE STUDENT SUPPLEMENTARY APPLICATION FORMS	YES <input type="checkbox"/>
INCLUDED A CERTIFICATE OF ENGLISH LANGUAGE PROFICIENCY AWARDED BY ONE OF THE RECOGNISED EXAMINING BODIES (ONLY FOR APPLICANTS WHOSE FIRST LANGUAGE IS NOT ENGLISH). IF YOU HAVE NOT YET BEEN EXAMINED PLEASE GIVE DETAILS OF YOUR ENGLISH LANGUAGE TEST DATE	N/A <input type="checkbox"/> YES <input type="checkbox"/> DD <input style="width: 30px;" type="text"/> MM <input style="width: 30px;" type="text"/> YY <input style="width: 30px;" type="text"/>
COMPLETED THE REPLY SLIP	YES <input type="checkbox"/>

DO NOT INCLUDE ANY ADDITIONAL DOCUMENTATION SUCH AS ACADEMIC TRANSCRIPTS, REFERENCES, CV, ETC.

Please note that due to the time required to assess each application  
it may be several weeks before you are notified of a decision.

INTERVIEWS ARE GENERALLY HELD BETWEEN MID-MARCH AND MID-MAY. ALTERNATIVE DATES CANNOT BE ARRANGED.

### REPLY SLIP

**If you wish to receive notification that your application  
has been received please complete the reply slip.**

YOUR MATURE STUDENT SUPPLEMENTARY  
APPLICATION FORM WAS RECEIVED ON:

NAME
ADDRESS

DATE STAMP:
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