CAO Number

Family Name
Given Name

Date of birth

What country issued your passport?

If you do not hold a passport from an EU/EEA member state do you have:

- Official refugee status
- Yes [ ] No [ ]
- Humanitarian leave to remain in the State
- Yes [ ] No [ ]
- A certificate of Naturalisation conferring EU citizenship
- Yes [ ] No [ ]

Please complete Section A or B below:

A. If you are under 23:
State where the principal residence for the purpose of taxation of your parents has been in each of the years listed below:

<table>
<thead>
<tr>
<th>Month</th>
<th>Year</th>
<th>Town</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 2020</td>
<td>– September</td>
<td></td>
<td></td>
</tr>
<tr>
<td>September 2019</td>
<td>– September</td>
<td></td>
<td></td>
</tr>
<tr>
<td>September 2018</td>
<td>– September</td>
<td></td>
<td></td>
</tr>
<tr>
<td>September 2017</td>
<td>– September</td>
<td></td>
<td></td>
</tr>
<tr>
<td>September 2016</td>
<td>– September</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Have you been in full-time education in the EU/EEA for three of the last five years? Yes/ No

School name, School Address Dates From: To
1. ___________________________________________ ________________________
2. ___________________________________________ ________________________

B. If you are over 23:
State where has your principal residence for the purpose of taxation been in each of the years listed below:

<table>
<thead>
<tr>
<th>Month</th>
<th>Year</th>
<th>Town</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 2020</td>
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</tr>
<tr>
<td>September 2016</td>
<td>– September</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Have you been in receipt of a social welfare payment, in the EU/EEA for three of the last five years?  Yes/ No

Name of Social Welfare Payment ________________________________

Have you been in full-time employment in the EU/EEA for three of the last five years?  Yes/ No

Name of Employer, Address of Employer

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Dates  From: To

__________________________________________________________________________

__________________________________________________________________________

If you are offered and accept a place at Trinity College supporting documentation may be requested prior to registration. This may include a certified true copy of your passport, P21 forms, evidence of social welfare receipts, letter from school confirming attendance etc.

I confirm that all information provided above is correct

Signed ____________________________  Date ___________