PLEASE COMPLETE IN BLOCK CAPITALS

This declaration form is provided to accommodate students who wish to amend the name on their student record to that of the Irish version/translation of their name who do not hold official ID/Documentation presenting their name in Irish.

This form must be completed in conjunction with the Irish Language Officer of the college, as appropriate and can be emailed to Gaeloifig@tcd.ie.

TCD STUDENT ID NUMBER

I have read the regulations on the reverse of the Change of Personal Details application form and I understand that the amended details will appear on my record and any future documentation will be certified in these details.

Student Signature: ___________________________ Date: ________________

I have discussed this request with the student and I am satisfied that the name change request, is the correct and official Irish translation of their given name.

Irish Language Officer Signature: ___________________________ Date: ________________

Please return completed declaration form and Change of Details application form to the Academic Registry Service Desk.

Academic Registry, Watts Building, Trinity College Dublin TEL: + 353 (0) 1 896 4500 EMAIL: academic.registry@tcd.ie