



Language Exemption School Declaration Form

PLEASE COMPLETE IN BLOCK CAPITALS

This form is for use by students from non-state run schools and must accompany the second language exemption form

Applicant Details

- First Name (s): _____
- Surname: _____
- Address: _____

- Date of Birth: ____/____/____
- CAO Number: _____
- Email Address: _____
- Year of Commencement of Study at Second-Level in Ireland: (E.g., 2nd year, 3rd year)

Please indicate the reason for this Language Exemption Application:

(Select one of the following options by marking with an "X")

- Educated or part-educated outside of Ireland ☐
- Disability or Specific Learning Difficulty ☐

School Principal Declaration

This is to certify that the information on this form relating to this student is correct and that the student is not taking a language other than English in second-level exams.

- School Principal Signature: _____
- Date: _____
- School Address: _____
- School Phone Number: _____
- **School Stamp:**
(School Stamp)

Applications must be received by the Academic Registry no later than the **1st July on year of entry**.

Please post your application form and supporting documentation to the **Academic Registry, Watts Building, Trinity College Dublin, Dublin 2** marked "Language Exemption". We do not accept applications via email or fax.

Further information can be found on our application page
tcd.ie/study/apply/alternative-paths-to-trinity/application-for-language-exemption/