

Full-time:

NATIONAL COLLEGE OF IRELAND

APPLICATION TO NCI FOR REGISTRATION OF A RESEARCH DEGREE PROGRAMME

1. Candidate's Details Surname: Forename: Title: **Permanent** Address: Phone: Mobile: Email: **RSI/PPS** Number Date of Birth: Day Month Year **Nationality:** Female Sex: Male 2. School in which Research will take place 3. Award Sought: Master of Arts | Master of Science **Doctor of Philosophy** 4. Title/Area of Proposed Research Degree Programme _____ 5. Proposed Duration of Research Programme Proposed Start Date: Proposed Finish Date:

Part-time:

6. Third Level Education

Name & address of institutions attended	Awarding Body	Years of Study (from – to)	Award Title	Award Classification	Date Conferred

^{*} Graduates of awarding bodies other than the HETAC must provide a transcript of final, undergraduate examinations results, together with copies of the award(s); a translation of non-English transcripts to be provided and a certificate of English Language proficiency level. This documentation will not be returned.

7. Professional/Industrial Experience

Please give full details, in chronological order, of all previous **relevant** employment and/or industrial experience.

Dates (from – to)	Employer's name & address	Title and/or position held	Duties

8. Other Rele	evant Information		
8.1. Members	ship of professional bodies (including grad	de of membership and	admission dates