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**Certificate in Disabilities Studies**

**Application Form**

**PLEASE NOTE THAT YOU MUST INCLUDE A NON-REFUNDABLE APPLICATION PROCESSING FEE OF €20 WITH YOUR APPLICATION FORM.**

**AFFIX RECENT PASSPORT PHOTO HERE**

Surname Forenames

Maiden Name Nationality

Country of Birth Date of Birth

County Of BirthMale/Female

PPS NumberMobile Number

Main Telephone No: Work Number:

Email:

Correspondence Address

**If you are a current or previous student of St. Angela’s College – state student number:** …………………………………………………

**For office use only**

Fully competed application form Yes □ No □

Passport photograph (print name on back) Yes □ No □

Application Fee €20 Yes □ No □

IELTS or TOEFL certificate Yes □ No □ N/A □

**Offer**

Definite □

Conditional □

Reserve □

Refusal □

Ranking...............................................................................................................................................................

**Are you currently employed? Yes**  **No**

Please list appointments held in chronological order, briefly describing the nature of the work undertaken, if relevant to your application. **Continue on a separate sheet if necessary**

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| **No.** | **Dates From** | **To** | **Name & Address of Organisation** | **Contact Details of the Organisation** | **Role/Title** |
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| 2. |  |  |  |  |  |
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| 3. |  |  |  |  |  |

**Education History**

**Primary/Secondary/Third Level/PLC/FETAC/Other**

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| --- | --- | --- | --- |
| **Course Title** | **Qualification** | **Awarding Body** | **Year Completed** |
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| **Course Title** | **Qualification** | **Awarding Body** | **Year Completed** |
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| **Course Title** | **Qualification** | **Awarding Body** | **Year Completed** |
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**PERSONAL STATEMENT (no more than 500 words)**

In this section, please demonstrate your personal interest in this course. You may like to refer to your commitment to taking on this programme, e.g. how you intend to organise making time for your studies, or outlining your preparation for taking on this programme, (undertaking an ECDL course for example). Please outline also how this programme will help you achieve your future academic/vocational objectives.

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**Additional Criteria**

1. **St Angela’s College values the participation of students who are disabled, have an illness or specific learning difficulty.** **Please indicate whether you will require any additional support whilst at college.**

Yes  No

You may, if you wish, give further details below.

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You may also contact St. Angela’s Student Services to discuss your requirements. (details at:

[**http://www.stangelas.nuigalway.ie/departments/details.php?dept=Student Services&&info=About**](http://www.stangelas.nuigalway.ie/departments/details.php?dept=Student%20Services&&info=About%20))

1. **If English is not your first language, please tick the box to confirm that you have met the required criteria.**

I have demonstrated proficiency in the English language as evidenced by a score of 6.5 or above on the IELTs (no less than 5.5 in any component), or 88 on the TOEFL, or 61 on the Pearson PTE. I attach a certified copy\*.

Yes  No

\* **Certified copy is a photocopy endorsed and stamped by a member of the Garda Siochana or a Commissioner for Oaths. In the case of examination transcripts, these must be stamped by awarding college.**

1. **Please tick the box below to confirm you have met the required Information Technology criteria.**

I confirm that I have the technical facilities outlined in the FAQs (available at: <http://www.stangelas.nuigalway.ie/departments/course_details.php?id=INT57&&ver=en>)

Yes  No

1. **How did you hear about the course?**

**Social Media From a friend/colleague**

**From an organisation From my workplace**

**Agent Website** ……………………………………………

**Other, please specify**……………………………………………………………………………………………………...

*I acknowledge that the particulars given in relation to this application are in all respects true.*

**SIGNATURE** ……………………………………………………………………………………**DATE** ………………………

**Checklist**

Before submitting this application, please ensure that you have satisfied the requirements listed below. Incomplete entries or those not fulfilling these requirements will not be considered.

1. Fully competed application form

2. Passport photograph (print name on back)

3. Application Fee €20 (non-refundable) (Cheque/Postal Order/Bank Draft - STRICTLY NO CASH – payable to St Angela's College)

4. IELTS or TOEFL certificate for applicants whose first language is not English

**Please return your completed application form to:**

**Disability Equality Studies, Department of Nursing, Health Sciences and Disability Studies, St Angela’s College, Lough Gill, Sligo.**