

**UNIVERSITY SCHOLARSHIPS: 2017**

**Application Form for Admission to a Research Degree Programme**

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| 1 APPLICANT’S DETAILS | Surname | |  | | | | |
| Other names | |  | | | | |
| Permanent Home Address \*          Post Code: | | | Address for Correspondence (if different)        Post Code: | | | |
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| Telephone: |  | | Telephone: | | |  |
| Email: |  | | | | | |
| 2 PROPOSED PROGRAMME OF STUDY | Faculty: Choose an item. | | | | | | |
| Qualification Aim:  MPhil/PhD | | | | | | |
| Proposed Start Date: Month       Year | | | | | Mode of Study: Full Time  Part Time | |
| University Scholarship Reference: Choose an item. | | | | | | |
| If you have had contact with a member of academic staff and they have expressed interest in supervising your proposed research programme please state their name: | | | | | | |
| 3 FEES/ SPONSORSHIP | Who is expected to pay fees? Applicant  Research Council  Employer  Sponsor/Parent/Guardian  Other (please specify) | | | | | | |
| Name and address to which fee invoice is to be sent (if other than applicant) | | | | | | |
| If your attendance at the University will be conditional upon the agreement  of your employer, please tick | | | | | | |
| 4 REFERENCES(At least one must be an academic reference) | Educational or Other Referees (please send report forms available on the internet to referees) | | | | | | |
| First Referee Name | | | | Second Referee Name | | |
| Position | | | | Position | | |
| Address | | | | Address | | |

\* Unless other instructions are given correspondence will be sent to the permanent home address

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| 5 EDUCATION Education since leaving school **(Please submit copies of all relevant certificates with your application)** | Institutions Attended | | | From | To | Examinations Taken and Qualifications Obtained | | Grade | | Date |
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|  | | | | | Examinations to be taken/with results pending (give subject and qualification) | | Grade | | Date |
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| 6 EMPLOYMENT EXPERIENCE | Present Position | |  | | | | Date of Appointment |  | | |
| Workplace Address | | | | | | | | | |
| Telephone |  | | | | | | | | |
| Name and Address of Employing Body (if different from above) | | | | | | | | | |
| Telephone |  | | | | | | | | |
| Details of previous posts held | | | | | | | From | To | |
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| 7 ENGLISH LANGUAGE PROFICIENCY | What is your first language?  If your first language is not English please state your IELTS score       **or** TOEFL score:  If you have not taken an English test yet, what date do you plan to take it?  What other English Language qualifications do you hold?  How many years have you studied English Language?  Have you been taught in English in your home country? YES  NO  If you please give details below: | | | | | | | | | |

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| 8 SUPPORTING STATEMENT | Give a statement of your reasons for wishing to undertake this programme and any other details you feel may be relevant to your application. Indicate your main areas of interest. You may use the space below or attach a statement.  Please do not exceed 500 words. | |
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| 9 MARKET RESEARCH | Please specify how you came to hear of our research opportunities. Please tick one box. | |
| Prospectus  TV Advert  Careers Office  Careers Fair  Radio Advert  Own Initiative  Press Advert  Other (please specify) | |
| 10 CRIMINAL CONVICTIONS | **You must declare if you have a relevant criminal conviction, including violence against the person or drug dealing. If you tick the ‘Yes’ box, the University may ask you for further details.**  Yes  Please note that if you are convicted of a criminal offence while your application is being processed, you should notify the University immediately. | |
| 11 DECLARATION | **I declare that, to the best of my knowledge, the information I have given above is correct in every detail. If enrolled, I agree to abide by the regulations in force at the time.**  Confirmation of Declaration | Date  Click here to enter a date. |
| **The completed application form should be returned electronically to researchstudents@dmu.ac.uk** | | |