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**APPLICATION FORM FOR PART-TIME COURSES**

Please complete in BLOCK CAPITALS and return it with your payment to GMIT Lifelong Learning Centre, Dublin Road, Galway. Tel: 091 742145 Email LLL@gmit.ie Website: www.gmit.ie/LLL

**Course : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| Surname: | First Name(s): |
| Date of Birth *(1):* - | Male □ Female □ *(2)* |
| Address: | E-mail: |
|  | Mobile Telephone: |
|  | Country of Birth: *(2)* |
|  | Nationality: *(2)* |

**Orm ati***(1) Needed to create a unique student ID record (2) Needed for statistical recording purposes*

*Previous qualifications (complete for Accredited courses only). You may be asked to send transcripts of results and a copy of the qualification achieved.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *College/ Institution* | *Course Completed* | *From Month/Year* | *To Month/Year* | *Result Achieved* | *Date Conferred* |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Where did you hear about this course ?:

□ GMIT website □ Other website \_\_\_\_\_\_\_\_\_\_\_\_\_\_ □ Poster □ Newspaper \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Radio □ Word of Mouth □ Other source \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 2: Course Choice(s)**

**SECTION: 3 Fee Payment**

Payment: □ Cheque □ Bank Draft / PO □ Employer Invoice

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Debit Card |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Expiry |  |  | / |  |  |
| Credit Card |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Expiry |  |  | / |  |  |

**SECTION 4: Signature**

Information held by the Institute on computer will be used only for the purposes registered under the Data Protection Act 1988, that is the provision of education and training services. A copy of your details held by the Institute on computer is available on request. A fee may be payable for this. I declare that the above information is correct and if admitted to GMIT, I will abide by the Code of Student Conduct for Galway-Mayo Institute of Technology.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_