



# Registration Form

## Full-time Courses

PLEASE USE BLOCK LETTERS AND BLACK INK

ALLOW A SPACE BETWEEN WORDS

Please read the guidelines prior to completing this form

**ID Number:** (If known)

**Title** (Mr/Ms/Mrs etc.)

**Sex:** Male  Female

**Surname:**

**Date of Birth:** (See note 3)

Day Month Year

**First Name(s):** (See note 1)

**PPs No.:**

**Home Address:** (See note 2)

**Address while attending CIT:** (If different to above address)

**Mobile No.:**

**Nationality:** (See note 4 & 5)

**Domiciliary of Origin:** Have you been residing in Ireland for all of the 3 years prior to commencing this course? Yes  No

If No, enter the city and country where you most recently resided prior to entering Ireland:

**Residency:** Have you been residing in Ireland (or another EU country) for any 3 out of the 5 years prior to commencing this course? Yes  No

**E-mail Address (Please PRINT)**

**Name of Next of Kin**

**Relationship**

**Next of Kin Contact Number**

**Do you have any disability or impairment?** (See note 6) Yes  No

**FULL TITLE OF COURSE** (See note 7 & 8)

**COURSE CODE CR** (See note 7 & 8)  -  -

Level 6-10 Yr/Stage

**Commencement date**

(current year) Month Year

**TICK / APPROPRIATE BOX**

MODE OF ATTENDANCE

Full-Time

ACCS (PT)

Repeating the course

Exams Only

Project Only

**PLEASE ENTER YOUR MODULES** (See Note 9)

Semester 1 (September - December)		Semester 2 (February - May)	
CRN (5 digits)	Module Code or Name	CRN (5 digits)	Module Code or Name

Have you applied for, or are you in receipt of, a grant or scholarship? Yes  No

Name of awarding Body

Have you already been in receipt of a SUSI Grant? Yes  No

**HIGHEST QUALIFICATION OBTAINED TO DATE** (See note 10):

**NUMBER OF YEARS SPENT IN 3RD LEVEL EDUCATION:**  Dates: from / / to / /

**NEW ENTRANTS TO THIS INSTITUTE AND/OR THIS COURSE OF STUDY** (See Note 11)

Name and Address of School/College last attended

**Previous school type** (As per Table overleaf)

**DECLARATION BY APPLICANT** I declare that the information given by me is true and accurate. I agree to abide by the rules and regulations of CIT (see Note 12)

Applicant's signature  Date

**ENROLMENT AUTHORISED**

Head of Department  Date

**FOR OFFICE USE ONLY**

BR  HoD  Birth Certificate/Passport  Visa (if rel.)

# Guidelines for the completion of the Registration Form

1. Please enter your full LEGAL name (AS ON YOUR BIRTH CERTIFICATE OR PASSPORT). **THE NAME YOU ENTER HERE WILL APPEAR ON ANY AWARD OR PARCHMENT TO WHICH YOU ARE ENTITLED.**
2. The address that you use here will be used for all correspondence. The Admissions Office should be notified in writing of any change of address. A Change of Contact details form is available at [www.cit.ie/admissions](http://www.cit.ie/admissions) or email [admissions@cit.ie](mailto:admissions@cit.ie) with details.
3. New entrants to this Institute should attach a copy of their birth certificate or passport to this form, showing their legal name.
4. If your first language is not English, you may be required to provide certification of competence in English (e.g. IELTS, TOEFL).
5. Non-EU Applicants must observe the entry requirements for the course, as well as the visa requirements. Applicants should attach a copy of their passport and visa.
6. The purpose of this question is to ascertain whether you require any special arrangements which will facilitate your attendance at class or assist you in taking your examinations. If you tick this box you will be contacted subsequently. All information supplied will be treated confidentially. If you have any medical condition that could give rise to difficulties while attending, please inform your Head of Department.
7. Please enter the full course title, course code and stage as per the CIT Handbook, or [www.cit.ie/courses](http://www.cit.ie/courses)
8. Please choose from one of the following course levels:
  - Higher Certificate (Level 6) • Bachelor Degree (Level 7) • Honours Bachelor Degree (Level 8)
  - Master's Degree (Level 9) • Postgraduate Diploma (Level 9) • Doctoral Degree (Level 10)
9. Only students doing Exams Only, Repeating & Attending, Project Only or ACCS (PT) need complete this section. This form will be used as an exam entry form, therefore it is essential that you complete this section, detailing the modules you are attempting. If your modules change please ensure authorisation from your department. Look at [www.mycit.ie](http://www.mycit.ie) for instructions on how to check on web4student ([www.mycit.ie/web4](http://www.mycit.ie/web4)) that you are enrolled in all your modules before the deadline. **THE ONUS IS ON YOU TO ENSURE THAT THIS INFORMATION IS CORRECT. FAILURE TO ENTER THE CORRECT MODULES MAY RESULT IN YOUR BEING REFUSED ADMISSION TO AN EXAMINATION OR DELAY THE PROCESSING OF YOUR RESULTS.**
10. Enter the highest qualification obtained to date e.g. Leaving Certificate, Higher Certificate, Ordinary Degree (Level 7), Honours Degree (Level 8).
11. New entrants to the Institute and/or course of study should give full details of last school/college and course attended. Please choose a code below for your previous school type:

## Table

Code	Description of previous school	Code	Description of previous school type
01	Outside State non-resident	07	Community or Comprehensive Schools
02	Not full-time in State in Previous year	08	Privately Funded Schools
03	(i) Other IOTs in 2nd Level	09	Other Educational Institute in State 2nd Level
04	(ii) Other IOTs in 3rd Level	10	Other Educational Institute in State 3rd Level
05	Vocational/Community Colleges	11	Internal transfers 2nd to 3rd Level
06	Secondary School	12	Internal transfers from 3rd Level

12. Copies of the Student Regulations may be obtained from the CIT website: [www.cit.ie](http://www.cit.ie)
13. Please notify the Admissions Office in writing if you decide to leave the course.

**PLEASE NOTE: STUDENTS ARE NOT REGISTERED ON THE COURSE UNTIL ALL DUE FEES ARE PAID IN FULL.**

Students who are not fully registered are not entitled to avail of any of the Institute's facilities and may not sit exams.

**ALL OFFERS OF PLACES ON CIT COURSES ARE MADE SUBJECT TO THE APPLICANT PROVIDING DOCUMENTARY EVIDENCE OF IDENTITY, QUALIFICATIONS, WORK EXPERIENCE AND, IN THE CASE OF NON-EU APPLICANTS, DOMICILIARY STATUS.**

In the event of an applicant providing false or misleading information which is relevant to your application you will be asked to leave the course.

Data Protection Act Information held by the Institute will be used for the purposes registered under the Data Protection Act 1988 the provision of education and training services. A copy of your details held by the Institute is available on request. A fee may be payable for this.

**THIS FORM, FULLY COMPLETED, SHOULD BE RETURNED TO:**

**Admissions Office, Cork Institute of Technology, Bishopstown, Cork, Ireland.**

*This form does not infer or impose any legal obligations on Cork Institute of Technology to provide courses or other services to students. The information may be altered, cancelled or otherwise amended at any time. It does not constitute an offer to supply courses or modules and it is not to be construed as imposing a legal obligation on the Institute to supply courses or modules in respect of any course of study.*