



PRIFYSGOL
BANGOR
UNIVERSITY

APPLICATION FORM FOR ADMISSION TO POSTGRADUATE STUDY

Please return the completed form to:

**Postgraduate Admissions Office
Bangor University
Main Arts Building
College Road
Bangor
Gwynedd, UK
LL57 2DG**


Tel: +44 (0)1248 38 3762/3723

Fax: +44(0)1248 370451

E-mail: postgraduate@bangor.ac.uk

Please read the 'Notes for Guidance' before completing this application form

SECTION A – PERSONAL DETAILS

Surname/Family Name:		First Name, Second Name:		
Title(e.g. Dr/Mr/Ms):	Date of Birth: (DD-MM-YYYY)	Gender (Male/Female):	Country of Birth:	Nationality:
Permanent Home Address:		Correspondence Address (if different):		
				
Contact Telephone No:	Contact Fax No:	Contact e-mail:		
Welsh Language Ability				
Do you speak Welsh? YES NO				
If YES, would you like the University to communicate with you in Welsh? YES NO				
Residential Information				
Have you lived in the UK/EU continuously, with the exception of holiday periods, since birth? YES NO				
If YES go to Section B, if NO please answer the two questions below:				
If NO, please state precisely where you have been resident during the last 10 years (including periods spent in further/higher education):				
Is there any restriction on your eligibility to reside / work in the United Kingdom? YES NO				
If the answer is YES, please specify such restrictions:				
If you require a Student Visa in order to study in the UK please enter your passport number here:				

SECTION B – COURSE OF STUDY DETAILS

Will you study FULL-TIME , PART-TIME, PART-TIME (DISTANCE LEARNING) (delete as appropriate)

Department/School in which you would like to study: _____

Proposed year and month of entry: Year: _____ Month: _____

During the period of your proposed study, will you be registered simultaneously for any other Higher Education qualification either at Bangor or elsewhere? **YES** **NO** . If YES, please give details:

Please indicate which course of study you would like to be considered for by ticking the appropriate box below:

RESEARCH

MPhil:	PhD:	Edd:	DMin:	DClinPsy (CPD):	Non-graduating research:
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AREA OF RESEARCH:

If you have already discussed your research topic/proposal with a member of staff within the academic school/department, please write their name here:

TAUGHT COURSES

PG Certificate:	PG Diploma:	MA:	MSc	MBA
MTh:	MMus:	MMin:	MRes:	Non-graduating: (taught modules)

TITLE OF COURSE:

SECTION C – EDUCATION AND CAREER

You should indicate here details of all **POST-SECONDARY** education, academic and professional qualifications achieved/expected (please put official title of award) with the most recent first. Please attach photocopies of official transcripts / certificates

University / Institution attended (with dates)	Degree / Qualification title	Main Subject	Classification or Grade	Date of Award

Personal Statement

Other relevant information and/or experience you would like to include in support of your application (applicants for higher degrees by research should include a detailed research proposal on a separate sheet).

Details of relevant employment

Employer (with dates)	Period of Employment	Main Duties

SECTION D – FINANCIAL SUPPORT

Please indicate how you intend to finance your studies at Bangor (please place a Y in the appropriate box below):

(Section D.1 or D.2 **must** be completed in order for this application to be processed; in the event that this section is left incomplete, we will assume that you will self-finance your studies and you will be invoiced for the full amount when you register for your studies).

Self funding (please sign and date statement D.1 below)

Third party funding, e.g. scholarship, employer, sponsor, research council (representative of the funding body should complete section D.2 below)

D.1: Self funding Candidates:

I am aware of the costs involved in financing my studies and I accept that any fees that are due and payable to Bangor University, howsoever incurred remain my sole responsibility for payment.

Signature Date:

D.2: Third party funding:

Name of funding body

As an authorised representative of the above named body I confirm that any fees due and payable to the Bangor University in respect of this application for study will be met by the above named body. Please invoice the address below for the specified amount:

Name and address for invoice:

Amount to be invoiced:

Signature (Authorised Representative) Date

Name (please print) Position

SECTION E – ADDITIONAL INFORMATION**Criminal Convictions**

Do you have any criminal convictions

(excluding motoring offences for which a fine and/or up to three penalty points were imposed) ? **YES** **NO**

Ethnic Origin

This information is collected for statistical purposes only. Please T the relevant box.

I would describe my ethnic origin as:

11 White (British)	29 Black (Other)	39 Asian (Other)
12 White (Irish)	31 Asian (Indian)	41 White & Black Caribbean
19 Other White background	32 Asian (Pakistani)	42 White & Black African
21 Black Caribbean	33 Asian (Bangladeshi)	49 Other mixed background
22 Black African	34 Asian (Chinese)	80 Other ethnic background

