##

MASTERS BY RESEARCH SCHOLARSHIP APPLICATION FORM

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| 1. **PERSONAL DETAILS**
 |
| ***All applicants must complete this section.*** |
| **Title:** |       |
| **Surname:** |       | **Forename**: |       |
| **Postal****Address:** |       | **E-Mail Address For Correspondence**: |       |
| **Daytime Tel:** |       | **Mobile Tel:** |       |
| **Gender:** | **Male**  |[ ]  **Date of Birth:** |       | **Nationality:** |       |
|  | **Female** |[ ]   |  |  |  |
| **Country of Birth:** |       | **Student No:** |       | **PPS No:** |       |
| **SPECIAL NEEDS:** Do you consider yourself to have a disability or significant health problem which will require a specific support mechanism during your period of study? If so please give details below: *(use additional sheets if necessary).* |
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| 1. **COURSE APPLICATION**
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| ***All applicants must complete this section.*** |
| **Masters by Research Project Title:** |  |
| **Award Sought:***Please select one only* | **MA** [ ]  | **MBUS** [ ]  | **MENG**  [ ]  | **MSC** [ ]  |

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| 1. **[A] THIRD LEVEL EDUCATION**
 |
| ***All applicants must complete this section.*** |
| **From – To:** | **Institution:** | **Course:** | **Qualification:** |
|       |       |       |       |
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| **[B] EXAMINATIONS TAKEN / TO BE TAKEN** |
| **Year:** | **Examination:** | **Result:** | **Examining Body:** |
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| \**Applicants taking exams this year complete “pending” in result* |

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| 1. **RELEVANT WORK EXPERIENCE *[add additional page if necessary]***
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| **From – To:** | **Employer:** | **Position:** | **Description:** |
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| 1. **RESEARCH EXPERIENCE / PROJECT WORK** [add additional page if necessary]
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| **Outline any previous research project work you have carried out at either undergraduate or postgraduate level:** |
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| 1. **REFEREES**
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| **Name:** | **Company Name / Address:** | **Telephone:** | **Email:** |
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| 1. **CHECKLIST**
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| **Please ensure the following:** | **Tick** |
| Application Form is fully completed |[ ]
| Cover letter included |[ ]
| Full certified transcript of examination results included\* |[ ]
| Curriculum Vitae included |[ ]
| * **The application form must be fully completed before it can be processed**
* **Applications without these attachments will not be accepted. \****(Applicants taking Level 8 exams this year may be offered a conditional scholarship contingent on achieving a 2H2 or higher Level 8 degree award prior to the commencement of the scholarship programme).*
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| 1. **DECLARATION**
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| I declare that:* The information given by me in this application is true and accurate.
* I authorise the Institute of Technology, Tralee to seek any relevant transcripts of results from other Institutions which are necessary for the processing of this application.
* I authorise the Institute of Technology, Tralee to contact past / present employers to seek clarification where sufficient information relating to my work experience is not supplied by me.
* If I am admitted as a student, I will abide by the Regulations of the Institute of Technology, Tralee.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**PLEASE E-MAIL YOUR COMPLETED APPLICATION FORM TO:** **research@ittralee.ie*****Research Office (R101), Business/IT Building, North Campus, IT Tralee, Dromthacker, Tralee, Co. Kerry*** |