

## **APPLICATION FOR RE-ADMISSION – Year 1**

This form is for students who registered on a programme at either MIC or UL, but exited prior to taking examinations.

Students who have taken examinations and wish to apply for internal transfer to MIC, should contact Student Academic Administration for consideration through Student Status Committee.

PART 1 (to be completed by Student)			
Name:	Former ID No	o.:	
Address:			
PPS No.:	Telephone No.:		
Have you applied through CAO as HEAR or DARE stude If answer is Yes please state year	nt previously? No	Yes Year	
Former Course of Study:			
Cumulative QCA at time of leaving:			
Year and Semester Study Commenced at the College:	Year and Semester Study Terminated at the College:		
Reason for Terminating:			
Details of employment or other activity since termination employer reference(s) where relevant and /or support			
I wish to be readmitted to the College in Semester:	Ac	ademic Year	
To the following Course of Study:			

Statement in Support of Readmiss assist you)	sion (The Student Counsellor	or your former Adviser may be able	to
Student Signature:		Date:	
Please email completed application	on form to: <u>admissions@mic.u</u>	<u>ıl.ie</u>	
CLOSING DATE: 1 July			
PART 2 - (FOR OFFICE USE ONLY)			
Admissions Committee Recomme	endations/Comments:		
Please tick			
Satisfies Minimum & Specific Subject Requirements	Points Score	Accept	
Yes	Points:		
No	Satisfies Minimum Points	Yes	
	Yes	No	
	No		
Comments:			
confidentiality in accordance to collected will be retained in lir form, you are requesting that	with the General Data Protene with MIC's Records Reternyour information is processestion for Re-Admission Form.	highest standards of security and ction Regulations (GDPR). Data ation Schedule. By completing this ed in line with college procedures Your privacy is important to us. et click here.	S
Signature:		Date:	