



Application for Matriculation as a Postgraduate Student

This form must be completed by candidates applying to register for higher degrees and university postgraduate diplomas and returned to the University of Wales, University Registry, King Edward the VII Avenue, Cardiff, CF10 3NS, at least one month before the commencement of study. Email: registration@wales.ac.uk

Candidates for Master's degrees and University postgraduate diplomas and certificates may matriculate on the basis of holding a **recognised** degree or equivalent professional qualification. The University may also approve the admission of non-graduates whose relative lack of formal qualifications is compensated for by substantial relevant experience. The University has established protocols for the matriculation of non-graduate entrants to particular types of study. Such a candidate must have held a position of responsibility of relevance to the proposed scheme of study for an acceptable period of time. Irrespective of a candidate's entry qualifications, the University must be satisfied that he/she is of the required academic standard to complete the scheme of study proposed.

It is desirable though not a requirement of entry that candidates applying to register on an MBA have 2 years relevant and responsible experience in addition to the above mentioned entry requirements.

Please indicate, by ticking the appropriate box, the basis of your admission to your postgraduate scheme of study:

Degree/Professional Qualifications Now complete section A, B, D, E & F	<input type="checkbox"/>	AND/OR	Relevant Responsible Experience Now complete section A, C, D, E & F	<input type="checkbox"/>
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(A)

Forename:	
Surname: <i>as it appears in your passport and in the order you would like it to appear on your certificate</i>	
University Student Number:	
Title: <i>(Dr/Mr/Mrs/Ms/Miss etc.)</i>	Date of Birth: <i>(dd/mm/yyyy)</i>
Telephone Number: <i>(Including area code)</i>	E-Mail Address
Country of Residence:	Nationality:
Institution you will be studying at:	Address: The outcome of an application will be sent to the Collaborative Centre unless an application has been made independently
Title of Degree: <i>(e.g MA, MBA, MPhil, PhD)</i>	
Title of Course:	
Start Date of Course:	
Length of Course:	
Mode of Study: <i>(ie full-time, part-time)</i>	

(B) Please provide details of previous academic and professional qualifications (in order of the most recent first) - please attach a certified copy of the transcripts and certificates

Awarding Body & Country of Study	Dates Study Undertaken:	Title of Qualification:

(C) Age on first day of entry to postgraduate study years months

Please provide brief details of relevant professional experience in the space provided – please attach a full CV and references from previous employers

Date:	Position:	Responsibilities:

(D) English Speaking competence (for non UK applicants only) - please attach transcripts and certificates
Is English your first language? Yes <input type="checkbox"/> No <input type="checkbox"/>
Was English the language of instruction for the qualification you have most recently undertaken? Yes <input type="checkbox"/> No <input type="checkbox"/>
What English Language qualification do you have?
Score/Grade (individual grades)
Date of examination:

(E) Passport and Visa (For non EU applicants only – please attach copy of complete passport, copies of current and previous visas).	
Passport Number:	Do you hold a valid UK visa? Yes <input type="checkbox"/> No <input type="checkbox"/>
Date passport issued:	Type of current visa:
CAS Number:	Expiry date of current visa:

(F) I hereby confirm that the information held on this form is true and accurate.
Signature of Candidate.....Date.....

PLEASE ENSURE THE SPELLING AND ORDER OF YOUR NAME IS CLEAR AS THIS IS HOW IT WILL APPEAR ON YOUR CERTIFICATE