

Postgraduate Application Form



Notes for Guidance

- 1. This form should be used if you wish to apply for a taught postgraduate course or research degree by full-time, part-time or distance learning mode, with the exception of the MA in Social Work and the Doctorate in Clinical Psychology. (Please refer to the postgraduate prospectus with regard to application arrangements for these degrees).
- 2. Before completing this form, please refer to the Postgraduate Prospectus (this is available on-line at http://www.le.ac.uk/graduateoffice/pgprospectus/) to check course availability and start dates. For your application to be successful you must meet the necessary English Language and academic entry requirements, full details can be found in the Postgraduate Prospectus.
- 3. Please complete the form in BLOCK CAPITALS or type, so that your information can be easily read.
- 4. When completing the form please ensure that you provide your full name (surname/family name and forenames) in the order they appear in your official documents i.e. passport. This is important because you will be registered in this name and if you successfully complete your course it is this name which will be on your certificate. It will only be changed during your studies if it is changed officially, for example, through marriage. Where this is the case a legal document (marriage certificate, standing declaration etc) will be required to make any changes.
- 5. If your supporting documents are not in English, we require officially translated versions as well as copies in the original language.
- Some postgraduate courses have published deadlines; please refer to the academic department you wish to apply to for further details.
- 7. If you are applying for a postgraduate course or research degree by full-time or part-time study, please return the form with supporting documents (copies of transcripts, your completed references etc) to the Postgraduate Admissions Office, University of Leicester, University Road, Leicester, LE1 7RH. Applications for distance learning programmes should be returned directly to the academic department.
- 8. If your application is successful, a firm offer will be issued from the Postgraduate Admissions Office. With an offer you will receive useful information regarding admission to the University. Conditional offers may also be issued for applicants who:
 - i. Have not yet met the University's English language requirements.
 - ii. Need to provide further academic transcripts (i.e. final results).
 - iii. Need to provide other specified documentation (e.g. certified copies or translations).
- 9. In order to accept the offer, follow the instructions in your offer pack.
- 10. Instructions on how to register will be sent prior to your start date.

If you have any questions about filling out your application form please do not hesitate to contact the Postgraduate Admissions Office Tel: +44 (0)116 252 5381 · Email: pgadmissions@le.ac.uk

Data Protection Statement

By signing this form you are consenting to the University of Leicester using the information provided from time to time, along with any further information about you that the University may hold, for the purposes set out in the Postgraduate Data Protection Statement (http://www.le.ac.uk/ua/rg/dataprotection/html_docs/student_regform_dataprotection.htm).

The information that you provide on your application form will be used for the following purposes:

- To enable your application for entry to be considered and allow our Admissions Advisors, where applicable, to assist you through the application process;
- To enable the University to compile statistics, or to assist other organisations to do so. No statistical information will be published that would identify you personally;
- To enable the University to initiate your student record should you be offered a place at the University.



FOR OFFICE USE ONLY	
APPLICATION NO:	

Application for Admission to Graduate Studies

This form should be completed and returned (along with supporting documentation as required) to the Postgraduate Admissions Office, University of Leicester, University Road, Leicester LE1 7RH. Two sealed and stamped references should be included with this application form. Please complete this form in BLOCK CAPITALS or type.

PERSONAL DETAILS					
Surname/Family name: First/giv			iven names:		
Previous surname/Family name (if applicable): Title (D			Dr, Mr, Mrs, Ms,	Miss, etc):	
Date of birth:	Sex	x (male or fo	emale):	Present nationality:	
Country of birth:			Country of pe	ermanent residence:	
ADDRESSES					
Permanent home address: (This i	must be completed)		Address for s	orrespondence (if different from home address):	
Permanent nome address. (This i			Address for C	orrespondence (ii different from home address).	
Postcode:			Postcode:		
Tel:			Tel:		
Fax:			Fax:		
Email:			Email:		
PROGRAMME OF STUDY			COURSE TITI	LE (for taught courses only)	
APPLICANTS FOR RESEARCH Proposed start date: NB: Candidates accepted onto resatisfactory progress and the app	October	anuary are registered as A	April July Advanced Postgraduate Students. Subject to ill be transferred to a specific degree (MEd, MPhil or		
PhD) after one year.					
University Staff Members On	ly				
Please indicate whether you are	applying for the remission of p	art time fee	es (forms availab	le from Staff Development) Yes No No	
FOR OFFICE USE ONLY					
Accept - Unconditional	CONDITIONS				
Accept - Conditional	Degree			Date received in AO	
Reject	English Language			Date to Dept	
Department:	References			Date rec'd in Dept	
Course:	Bench Fees			Date returned to AO	
Start Date:	Other			Date rec'd back in AO	
Supervisor(s):				Date offer sent	
Field of Study:					

Give details of further or higher education	on since leaving school. Please r	provide information on qualifications alrea	ndy obtained and examination
still to be taken.	on since leaving seriooi. Thease p	novide information on qualifications direct	ay obtained and examination
Name of institution / address	Dates (month – year) of attendance	Qualification/award (include class & division or grade obtained if known)	Main subjects
	from:		
	to:		
	from:		
	to:		
	from:		
	to:		
	from:		
	to:		
	from:		
	to:		
	from:		
	to:		
	from:		
	to:		
In addition to diplomas and certificates,	international applicants are re	rarded for these qualifications must be e equested to provide official copies of the an indication of their class ranking/pos	ir entire course transcripts
ENGLISH LANGUAGE COMPETENCE			
chosen degree programme at the Universidence includes: GCSE/O-level English	rsity, evidence that they have su Language at grade C or above; 90 IBT) in TOEFL, with a score o	first language must provide, before they fficient command of both spoken and wr an overall score of 6.0-6.5 in the British f 4.0 in the Test of Written English (TWE)	itten English. Acceptable Council IELTS test (depending
a) Is English your first language?		Yes No No	
	tion of your first degree?		
b) Is/was English the language of instruc	-	Yes No No Version No No Version N	as the language of instruction.
b) Is/was English the language of instruc If yes, please provide written confirmat	ion from the institution where y	Yes No No	
b) Is/was English the language of instruction of the language of instruction of the language of instruction of the language of instruction of the language o	ion from the institution where y	Yes No No Dou undertook your studies, that English wa	
b) Is/was English the language of instruc If yes, please provide written confirmat c) Please list any formal English Languag will be taking the test.	ion from the institution where y	Yes No No No Undertook your studies, that English was ained (ie IELTS, TOEFL, GCE, GCSE) and the	ne dates you took the test, or
b) Is/was English the language of instruc If yes, please provide written confirmat c) Please list any formal English Languag will be taking the test.	ion from the institution where y	Yes No No No Undertook your studies, that English was ained (ie IELTS, TOEFL, GCE, GCSE) and the	ne dates you took the test, or
b) Is/was English the language of instruction of the language of instruction of the language of instruction of the language of instruction of the language o	ion from the institution where y	Yes No No No Undertook your studies, that English was ained (ie IELTS, TOEFL, GCE, GCSE) and the	ne dates you took the test, or
If yes, please provide written confirmat	ion from the institution where y	Yes No No No Undertook your studies, that English was ained (ie IELTS, TOEFL, GCE, GCSE) and the	ne dates you took the test, or





Graduate Reference Form

Postgraduate Admissions Office University of Leicester · University Road Leicester LE1 7RH · England

SECTION 1 TO THE APPLICANT				
This is one of two Graduate Reference Forms provided with your of your two referees, requesting that they complete Section 2. The				
Surname/Family name:	First r	names:		Title (Dr, Mr, Ms, etc):
PROGRAMME OF STUDY		COURSE TITLE (for	taught courses or	nly)
MA MSc LLM MBA PhD Other full time Commencing in MPhil MEd (Research) Occasional Diploma Certificate Pre-Masters distance learning (month, year)		DEPARTMENT (for taught courses and research degrees)		
APPLICANTS FOR RESEARCH DEGREES: Give a brief description of your proposed research topics or inte	erests, inclu	ıding the formal title	of the proposed t	field of study.
SECTION 2 TO THE REFEREE				
The above-named is applying for admission to graduate studies grateful to receive, in confidence, your opinion of the candidate academic performance please give, if possible, the applicant's c class). If an exact position cannot be given, indicate the quartile	te's suitabilit class ranking	ty for the proposed of	ourse of study. W cluding the total	hen commenting on his/her number of students in the
Please return this form sealed and stamped to the applicant con	oncerned. Th	nank you for providin	g a reference.	
Please note that the University may, if applicant/student makes	a request,	show this reference t	o the applicant/st	udent.
Surname/Family name:	First r	names:		Title (Dr, Mr, Ms, etc):
Position:				
Relationship to Applicant:				
Address:				
Tel:	Fax:			
Fmail:				

REFERENCE	
Applicant's Name:	
Signature of Referee:	Date:





Graduate Reference Form

Postgraduate Admissions Office University of Leicester · University Road Leicester LE1 7RH · England

SECTION 1 TO THE APPLICANT						
This is one of two Graduate Reference Forms provided with your Application Form. Please complete this section before forwarding one form to each of your two referees, requesting that they complete Section 2. The forms should be sealed and stamped and returned with your application form.						
Surname/Family name:	First name	5:	Title (Dr, Mr, Ms, etc):			
PROGRAMME OF STUDY	cou	RSE TITLE (for taught courses or	nly)			
MA MSc LLM Occasional Diploma PhD Other Pre-Masters full time Commencing in MPhil MEd (Research) Occasional Diploma Certificate Pre-Masters distance learning (month, year)		ARTMENT (for taught courses an	d research degrees)			
APPLICANTS FOR RESEARCH DEGREES:						
SECTION 2 TO THE REFEREE The above-named is applying for admission to graduate studies at the University of Leicester, and has named you as a referee. We would be grateful to receive, in confidence, your opinion of the candidate's suitability for the proposed course of study. When commenting on his/her academic performance please give, if possible, the applicant's class ranking /position in class (including the total number of students in the class). If an exact position cannot be given, indicate the quartile in which you believe he/she has performed.						
Please return this form sealed and stamped to the applicant conce	rned. Thank	you for providing a reference.				
Please note that the University may, if applicant/student makes a request, show this reference to the applicant/student.						
Surname/Family name: First names: Title (Dr, Mr, Ms, etc):						
Position:						
Relationship to Applicant:						
Address:						
Tel:	Fax:					
Fmail:						

REFERENCE	
Applicant's Name:	
Signature of Referee:	Date:

EMPLOYMENT DETAILS / OTHER EXPERIENCE	E					
	search experience relevant to your application. In partic ork) should complete this section as fully as possible.	cular, applicants for pos	st-experience			
Continue on a separate sheet if necessary. Indica	ate here if you have done this					
Employer	Title and duties of post	Dates from	Dates to			
			+			
PERSONAL STATEMENT OR RESEARCH PROP	POSAL					
Research applicants – Give a brief description	GDip) – State your reasons for wishing to pursue the of your proposed research topics or interests, includin lad published or which is currently in the press, togeth	g the formal title of the	e proposed field of			
Continue on a separate sheet if necessary. Indica	ate here if you have done this					
FINANCIAL SUPPORT						
	o how you will be able to finance your studies. For int	ernal purposes, it is use	eful for us to know			
how you intend to finance yourself. Please tick a						
self	scholarship (if you are applying for or have obtain	ned a scholarship pleas	se give details)			
	Name of scholarship(s)					
employer						
other (please give details)	Which scholarship(s) have you obtained to date?					
NB: No student may be admitted to the University	without providing satisfactory evidence of their ability to	meet the expenses of the	eir proposed course.			
SPECIAL NEEDS OR SUPPORT						
Please state any support required as a conseque	ence of any disability or medical condition stated unde	r 'monitoring informati	on'.			
-						
OTHER INFORMATION						
Do you have any criminal convictions? NB: You are required to state whether or not yo	Yes 🔲 ou have any criminal convictions, excluding motoring c	No ☐ offences for which a fin	e and/or up to			
	he 'yes' box, you may be required to provide details of		c unavor up to			
Applications to other institutions: Please give de	Applications to other institutions: Please give details of other institutions/programmes of study for which you are also applying at this time:					

REFEREES				
with this application form. Candidates for any of	referees below. Your two completed references (sealed and stamped) should be returned the post-experience programmes (eg Education, the MBA, Social Work), should ensure that well as an academic contact. Referees are required to comment on your academic suitability			
Name:	Name:			
Address:	Address:			
Postcode:	Postcode:			
Tel:	Tel:			
Fax:	Fax:			
email:	email:			
	·			
PASSPORT INFORMATION				
If you need to apply for a visa to study in the UK,	, it is essential that you provide us with the following:			
Passport Number				
Country of issue				
Date of issue Expiry date				
DECLARATION				
I confirm that the information given on this form has been omitted. I confirm that I have read the I	is true, complete and accurate and no information requested or other material information Data Protection Statement enclosed.			
Signed:	Date:			
any time before or after a candidate's admission	rsity reserves the right to make without notice changes in regulations, courses, fees etc at on. Admission to the University is subject to the requirement that the candidate will dure and will duly observe the Charter, Statutes, Ordinances and Regulations from time			
FINDING OUT ABOUT LEICESTER				
How did you first learn about your proposed prog	gramme of study at University of Leicester?			
Press advertisement	Internet Alumni			
Prospectus	Met a University representative Advice from another education establishment			
Reference book on Graduate programme	Careers Service British Council			
Employer	Current student of the University			
Other – Please specify				

MONITORING INFORMATION					
The University is committed to a policy of equal opportunities. In order to monitor the effectiveness of this policy, applicants are asked to complete this monitoring form. These statistics are used solely for the purpose of monitoring application and admission rates and form no part of the selection procedure.					
Please return your form together with your application for graduate studies to the Postgraduate Admissions Office. The monitoring form will be separated from your application which will be forwarded to the Department for consideration.					
Please tick the box which you feel describes your ethnic origin.					
(11) White – British					
(12) White – Irish					
(19) Other White background					
(21) Black or Black British – Caribbean					
(22) Black or Black British – African					
(29) Other Black background					
(31) Asian or Asian British – Indian					
(32) Asian or Asian British – Pakistani					
(33) Asian or Asian British – Bangladeshi					
(34) Chinese or Other Ethnic background – Chinese					
(39) Other Asian background					
(41) Mixed – White and Black Caribbean					
(42) Mixed – White and Black African					
(43) Mixed – White and Asian					
(49) Other Mixed background					
(80) Other Ethnic background					
(90) Not known					
(98) Information refused					
	_				

то	TO BE COMPLETED BY ALL STUDENTS					
DIS	DISABILITY/SPECIAL NEEDS					
Plea	Please tick the box next to the statement which is most appropriate to you.					
		(0)	You do not have a disability nor are aware of any additional support requirements in study or accommodation			
		(1)	You have dyslexia			
		(2)	You are blind/partially sighted			
		(3)	You are deaf/have a hearing impairment			
(4) You are a wheelchair user or have mobile difficulties						
	(5) You need personal care support					
		(6)	You have mental health difficulties			
		(7)	You have an unseen disability, e.g. diabetes, epilepsy, asthma			
		(8)	You have two or more of the above disabilities/special needs			
		(9)	You have a disability not listed above			
			Please specify:			
			Course applied for:			