

SENDING INSTITUTION We confirm that this proposed programme of study/learning agreement is approved.

_____ Date: _____
Departmental coordinator's signature

RECEIVING INSTITUTION We confirm that this proposed programme of study/learning agreement is approved.

_____ Date: _____
School coordinator's signature
University College Dublin (IRL DUBLIN02)

RETURN COMPLETED APPLICATION FORM TO:

Catherine Convery
International Office
University College Dublin
Belfield, Dublin 4, Ireland.

Telephone: + 353 1 716 1776
Fax: + 353 1 716 1165
Email: Catherine.M.Convery@ucd.ie

FOR RECEIPT OF APPLICATIONS:

30 June 2007 for full Year/Autumn Semester students.

1 November 2007 for Spring/Second Semester students.

Note: All application forms have to be completed **in full** and returned before the deadlines indicated above, at the **very latest**.