APPLICATION FORM 2018 / 2019

YOU MUST ENCLOSE: 1. A photo Image: State of the
PROGRAMME CHOICE
Please write (in block capitals) the FULL title of the course you are enrolling for (e.g. CERTIFICATE IN PUBLIC MANAGEMENT) (Check the programme page for the FULL title).
Have you previously completed a programme with the IPA? Yes No
PERSONAL DETAILS (USE BLOCK CAPITALS)
Surname Forenames Middle name Image: Image
EMPLOYMENT DETAILS (USE BLOCK CAPITALS)
Employer
HOW DID YOU HEAR ABOUT THIS COURSE?
Please tick one of the boxes: IPA Brochure IPA Website Other Website (Please specify) Public Sector Times Newspaper National Press Regional Press National Radio Local Radio Information/Open Day Training Officer at Work Friends/Colleagues Other (Please specify) Friends/Colleagues Friends/Colleagues

Please complete the relevant parts overleaf

ENROLMENT FORM 2018-2019
QUALIFICATIONS
Second-Level Education Year in which you took your highest examination Please list the grades you achieved in the higher second-level exam, noting the level obtained:
Further Education/Third-Level Education (If Any) Title, major subjects
Awarding Institution
PROGRAMME DELIVERY
ONLY TO BE COMPLETED BY:- Certificate/Diploma in Public Management - Bachelor of Arts (Hons) (all streams)- Certificate/Diploma in Business Studies - Bachelor of Business Studies (Hons) (all streams)
Which tuition method do you intend to use?
LECTURES AT IPA BLENDED LEARNING In addition to weekend seminars in Dublin, extra tutorials may (subject to numbers) be offered to blended learning students at regional centres. Please tick the centre where you would attend such if provided:
Cavan Portarlington North Cork Galway Castlebar Portlaoise Longford Killarney
Have you been granted any EXEMPTIONS? Yes No
If Yes, do you wish to avail of them? Yes No
If you are availing of exemptions, consult your exemption offer for conditions of acceptance. Do not forget to enclose a copy of the letter listing exempted subjects.
Are you taking the programme by SUBJECT ACCUMULATION ? Yes No
FEES
Fees will be paid by: Applicant Employer Fees will be paid by employer, you MUST complete the section below as the IPA will be invoicing your employer.
How much of the fee will the employer cover
Purchase Order No.
Name and Address for Invoice i
Name of Authorising Officer
Signature of Authorising Officer
DECLARATION
Declaration I wish to apply for the programme as selected above. I confirm the details provided above are correct. I undertake to read the IPA's Rules and Regulations when these are provided on Registration. I understand that the data provided by me in this application form will be used and protected by the IPA in full compliance with data protection regulations.
Signature Please sign Date
Please send completed forms to: Admissions, Undergraduate Office, Institute of Public Administration, 57-61 Lansdowne Road, Dublin 4. Phone: +353 (01) 240 3600 LoCall: 1890 20 26 26 Fax: +353 (01) 668 9135 Email: undergrad@ipa.ie