

Surname/Family Name:		Previous Surname/Family Name: (if relevant)		Other Names: (in full)		Title:	
Permanent Home Address: Postcode:				<div> <div> date month year </div> <div> date month year </div> </div> Correspondence Address: (From / / To / /) Postcode:			
Telephone No. (including area code): Fax No. (including area code): Email address:				Telephone No. (including area code): Fax No. (including area code): Email address:			
Nationality	Country of Birth	Country of Permanent Residence	Date of Birth <div> date month year </div> / /	Male/Female	First Language (if other than English)		
Passport No. (Non - European Union Applicants only):							
UK/EU applicants: Have you been a resident (apart from short absences e.g., for holidays) in the EU for the three years prior to the start date of your postgraduate study? YES <input type="checkbox"/> NO <input type="checkbox"/> If NO, please give further details						For University use only	
Non-European Union Applicants currently in the EU: On what date did you first enter the EU? date: month: year:							
For what purpose?							

Department/School:							
Taught Programme Please state clearly the exact title of the programme as given in the Prospectus. Please indicate the languages to be pursued if you are applying for the MA Translation with Language Technology.					Full or Part-time:		Year of Entry:
Title of Programme:							
Tick qualification aim	MA <input type="checkbox"/>	LLM <input type="checkbox"/>	MRes <input type="checkbox"/>	MSc <input type="checkbox"/>	MBA <input type="checkbox"/>	Diploma <input type="checkbox"/>	Certificate <input type="checkbox"/>
Research Programme	Topic of Research:						
Tick qualification aim	MPhil <input type="checkbox"/>		PhD <input type="checkbox"/>		EngD <input type="checkbox"/>		MD <input type="checkbox"/>
Date on which you would wish to begin your research	Month: The University permits MPhil/PhD programmes to start on one of the following dates: 1 Oct, 1 Jan, 1 April, 1 July (subject to the approval of the school)					Year: Full or Part-time:	

Have you previously **applied** for admission to Postgraduate studies at Swansea? YES ☐ NO ☐

If yes, please give year of application

Have you previously **studied** at Swansea? YES ☐ NO ☐

3. FUNDING FOR YOUR PROGRAMME

Please provide information about how you will be funding your programme of study.

Self-funding ☐ Sponsorship (please provide letter) ☐ Applying for funding ☐

If you are **applying** for funding, please indicate from where (e.g. University Studentship/Company/etc.)

4. YOUR EDUCATION

Please give details of your **first degree (or equivalent qualification)**.

Awarding Institution or Body:

Official name of Qualification:
(e.g. BA, Diplom, Maîtrise, Ptychion, etc)

Subject(s):

Result (if known):
(e.g. class, GPA, etc)

Date of Award:

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Name and full postal address of the institution at which you studied for your first degree:

.....
.....

Dates of Attendance: From: Month Year

To: Month Year

NOTE: If you accept the offer to undertake postgraduate studies at Swansea University, it will be necessary to contact the awarding institution direct to confirm the details of your degree.

Higher Degrees and/or Professional Qualifications.

Title(s):

Date(s) of Award(s):

Name of the institution or awarding body:

If this space is not sufficient, you may attach an additional sheet to your application form.

English Language Proficiency - applicable only if your first language is not English

Please give IELTS, TOEFL or CPE score.

Copies of the relevant certificates need to be attached.

Name of test:

Score:

Date of most recent test:

Date of forthcoming test:

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Use this space to indicate if your undergraduate degree was taught through the medium of English or to add any further information regarding your English Language proficiency.

You may be required to undertake further studies in English before you commence your postgraduate programme