



Griffith College Cork

Direct Entry
Application Form



Griffith College

Griffith College Cork, 9/11 St. Patrick's Hill, Cork.

Tel: (021) 450 7027 - Fax: (021) 450 7659

Web site: www.gcc.ie - email: admissions@gcc.ie



Griffith College

Personal Details

Title: Ms Mr Mrs Dr Other _____

First Name (s): _____

Surname: _____

Date of Birth: Nationality: _____

If you are not a national of an EU member state, please supply appropriate supporting documentation relating to your residential status within the EU. This can take the form of your GNIB card or a letter from the Department of Justice, Equality & Law Reform.

Home Address: _____

Correspondence Address (If different from above): _____

Email: _____

Home Phone No: _____ Mobile No: _____

Courses Applying For

Please list the **direct entry courses** for which you wish to be considered in order of preference. (Please consult the College Prospectus).

1. _____ Full-time Part-time (please tick one)
2. _____ Full-time Part-time (please tick one)

CAO Information

Have you already applied for a college place this year through the CAO System: Yes No

If Yes to the above, please give your CAO number: _____

Second Level Education

Please supply a certified copy of your Leaving Certificate or equivalent exam results.

School Name: _____

From (year): To (year):

Address: _____

Examinations Taken: Leaving Cert A Level Other _____

Date of Examination:

Third Level Education (for postgraduate applicants)

You must supply an original certified copy of the final exam results you achieved.

Your application will not be processed without this information.

Name of Third Level Institute: _____

Title of Course: _____

Awarding Body: _____

Duration of Course: _____ From (year): To (year):

Date of Final Examinations: Overall Grade: _____

Transfer Application for Advanced Entry

You must supply an original certified copy of each year of your exam results.

In addition you must supply a copy of the syllabus of the course you previously studied.

Your application will not be processed without this information.

Name of Third Level Institute: _____

Title of course: _____

Awarding body: _____

Duration of course: _____ From (year): To (year):

Date of Final Examinations: Overall Grade: _____

Do you wish to be considered for exemptions? Yes No

Subjects you wish to be exempted from: _____

Current Employment Details (for part time applicants)

Company Name: _____

Company Address: _____

Contact No: _____

Declaration

I certify that the information given above, is correct and I hereby undertake to comply with all regulations of Griffith College. I also accept that Griffith College reserves the right to change any of the details given in any course brochure and that the course commencement is dependent on student demand. The course fee will not be refunded, as it is the College policy not to refund fees irrespective of the circumstances

Signature: _____ Date: _____

Disability/Specific Learning Difficulty

Although you are not obliged to do so, anyone with a disability or specific learning difficulty is encouraged to indicate this on their Application Form so that the appropriate supports can be made available. You may be assured that this disclosure will not adversely affect your application or your legal rights in any way.