

APPLICATION FOR POSTGRADUATE STUDY AND RESEARCH



When completed the form should be returned to:
 The Postgraduate Admissions Office
 Recruitment and Admissions Service
 Heriot-Watt University
 Edinburgh
 EH14 4AS, UK

Application Form and Guidance Notes are also available online at <http://www.postgraduate.hw.ac.uk/apply>

Application Reference Number																		FOR INSTITUTION USE ONLY
------------------------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--------------------------

Course Code						FOR INSTITUTION USE ONLY
-------------	--	--	--	--	--	--------------------------

1. Current/Previous HESA Number <small>(applies only if you have attended a UK College or University previously)</small>																	
---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

PERSONAL DETAILS

2. Family name (i.e. surname) _____ Other names _____	
3. Title (Please circle) Dr Mr Mrs Ms Miss Other _____	
4. Date of Birth (format e.g. 23 - 06 - 70) Day _____ Month _____ Year _____	
5. Sex (Please tick) Male <input type="checkbox"/> Female <input type="checkbox"/>	
6. Country of birth _____	7. Nationality _____
8a. Country of Permanent residence if not UK applicant _____	
8b. If your country of permanent residence is the UK please give dates of commencement of residence or state "from birth" _____	
8c. For International Students only Passport Number _____ Date of Issue _____ Place of Issue _____ Expiry Date _____	
9. Ethnic background <small>(See Guidance notes for appropriate code – please do not leave blank)</small>	<input type="text"/>
10. Disability/Medical Condition/Special Need <small>(See Guidance Notes for appropriate code)</small>	<input type="text"/>

11a. Permanent home address _____ _____ Postcode _____ Country _____ Telephone No _____ Mobile No _____ E-mail address _____	
11b. Correspondence address, if different (Remember you MUST advise us if this changes – All Correspondence will be sent to this address including offer letters) _____ Postcode _____ Country _____ Telephone No _____ Mobile No _____ E-mail address _____	
12. If you have a relevant criminal conviction please tick the box <small>(see Guidance Notes for definition of relevant criminal conviction)</small>	<input type="checkbox"/>

INTRODUCTION DETAILS

13. What was the main source of the information which led you to find out more about study at Heriot-Watt University?

Please tick one box only.

Careers Service	<input type="checkbox"/>	World Wide Web	<input type="checkbox"/>
Your University Teachers	<input type="checkbox"/>	Recruitment fair (please give details below)	<input type="checkbox"/>
Heriot-Watt staff	<input type="checkbox"/>	location:	date:
Friends or family	<input type="checkbox"/>	PROSPECTS postgraduate courses UK	<input type="checkbox"/>
Employer	<input type="checkbox"/>	Newspaper ad. (please give details)	<input type="checkbox"/>
British Council	<input type="checkbox"/>	Recruitment agent	<input type="checkbox"/>
Professional Body	<input type="checkbox"/>	Agent number (if applicable)	

FINANCIAL DETAILS

Please supply a Statement of Financial Guarantee (**See Guidance Notes for further information**)

14a. Give details of any grant/scholarship which has already been awarded to you for your proposed study (include annual amount, duration and name and address of sponsor)
14b. Give details of any application for a grant/scholarship which you have made or would wish to make .
14c. Name and Address of person (or Company) who will pay fees and maintenance costs (if no grant/scholarship arranged).

PREVIOUS ACADEMIC INFORMATION

15. DEGREES/DIPLOMAS/OTHER QUALIFICATIONS (Do not include High School qualifications)						
NAME OF UNIVERSITY/ COLLEGE/ INSTITUTION & COUNTRY e.g. Heriot-Watt University, UK	FROM (e.g. Oct 03)	TO (e.g. Jun 07)	TITLE OF QUALIFICATION (e.g. BSc Chemistry, MA Economics)	CLASS OF DEGREE (e.g. 2:1)	DATE AWARDED (e.g. Jun 07)	DATE <i>TO BE</i> AWARDED (e.g. Nov 07)
16. Please give details of subjects studied for above qualifications which are relevant to your proposed course of study. In addition, please give title of any dissertation or project undertaken. PLEASE CONTINUE ON A SEPARATE SHEET IF NECESSARY.						

17. PROPOSED PROGRAMME AND METHOD OF STUDY

Before completing this section, candidates are advised to consult The Guide to Postgraduate Study and Research to confirm that the proposed programme and method of study are offered by the University and at the required site. Please tick one box in each line as appropriate and enter other information in full.

Field / Subject of study or name of course	School		
Nature of study	By research <input type="checkbox"/>	By course <input type="checkbox"/>	
Method of study	Full-time <input type="checkbox"/>	Part-time <input type="checkbox"/>	Off campus / distance learning <input type="checkbox"/>
Proposed year of entry	Proposed date of entry (Taught courses on campus begin in September)		

17 Continued PROPOSED AWARD Please tick the appropriate box below

RESEARCH DEGREES	PhD <input type="checkbox"/>	EngD <input type="checkbox"/>	MPhil <input type="checkbox"/>	MSc (by Research) <input type="checkbox"/>
TAUGHT COURSES	MSc <input type="checkbox"/>	GRAD Certificate <input type="checkbox"/>	DBA <input type="checkbox"/>	MDes <input type="checkbox"/>
	MA <input type="checkbox"/>	MBA <input type="checkbox"/>	MURP <input type="checkbox"/>	PG Diploma <input type="checkbox"/>
			PG Certificate <input type="checkbox"/>	

18. Please give details of the proposed area of research. (To be completed by intending **Research** students only.)

19a. Is your native language English? Yes No

19b. If your **native language is not English**, and you have **not already studied** for a degree which was taught in English, give details of English language qualifications held e.g. TOEFL where the minimum score is 213. (Remember to include a copy of your test result with this application)

20. Please indicate your current position in employment or training and give details of any other information, including relevant work experience, which is important to your application. For some courses work experience is essential. Please state whether work was full-time or part-time and give dates, job titles and principal responsibilities. Continue on another sheet if necessary.

21. **REFERENCES** – You are required to supply two academic references with your application. Please supply the names of your referees below. Please note it is your responsibility to contact these referees. (Applicants with relevant full-time work experience may use their current employer as one of the referees.)

NAME _____ JOB TITLE _____

ADDRESS _____

TELEPHONE NO. _____ E-MAIL (IF AVAILABLE) _____

NAME _____ JOB TITLE _____

ADDRESS _____

TELEPHONE NO. _____ E-MAIL (IF AVAILABLE) _____

DECLARATION

I confirm that to the best of my knowledge and belief the information given in this application is complete and accurate. I understand and accept that the information contained in this application will be logged on a computer database and that it may be passed to concerned third parties for the purpose of processing and considering my application.

The completed form together with documentary evidence should be submitted to: The Postgraduate Admissions Office, Recruitment and Admissions Service, Heriot-Watt University, Edinburgh, EH14 4AS, UK

Signature of Applicant _____ Date _____

REMINDER: HAVE YOU INCLUDED THE FOLLOWING DOCUMENTS?

1. OFFICIAL DOCUMENTARY PROOF OF DEGREES, DIPLOMAS AND OTHER QUALIFICATIONS
2. TWO ACADEMIC REFERENCES
3. COPIES OF ANY PAPERS PUBLISHED
4. STATEMENT OF FINANCIAL GUARANTEE OR DETAILS OF AWARD
5. PROOF OF ENGLISH LANGUAGE ABILITY (IF REQUIRED)
6. *OPTIONAL*: PERSONAL STATEMENT OR ADDITIONAL INFORMATION TO SUPPORT YOUR APPLICATION.

REPORT BY HEAD OF SCHOOL**OFFER TO BE MADE TO STUDENT**

Proposed date of entry	Course code
Field / Subject of study or name of course	
Year of Study (if not first year)	
Nature of study By research <input type="checkbox"/> By course <input type="checkbox"/> By Course and Research <input type="checkbox"/>	
Method of study Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Off campus / distance learning <input type="checkbox"/>	
Period of study (Months)	

PROPOSED AWARD PLEASE TICK THE APPROPRIATE BOX

PhD <input type="checkbox"/>	MSc by Research <input type="checkbox"/>	MSc <input type="checkbox"/>	MDes <input type="checkbox"/>	MA <input type="checkbox"/>
MBA <input type="checkbox"/>	MPhil <input type="checkbox"/>	PG Diploma <input type="checkbox"/>	GRAD Certificate <input type="checkbox"/>	DBA <input type="checkbox"/>
EngD <input type="checkbox"/>	PG Certificate <input type="checkbox"/>	MURP <input type="checkbox"/>		

COMMENTS ON PROPOSED COURSE (Bench fees, Place of study, etc)**CONDITIONS TO BE MET BY STUDENT BEFORE ENTRY (please tick as appropriate)**

A	Need for further study. Please specify	<input type="checkbox"/>
B	Need for Completion of present course. State minimum award for entry.	<input type="checkbox"/>
C	Need for guarantee of adequate financial support. Note: this is a requirement for all students. OFFERS MADE WILL NOT BE "UNCONDITIONAL" UNTIL THIS REQUIREMENT IS MET AND EVIDENCE PROVIDED.	<input type="checkbox"/>
D	Need for further references. Please specify from whom.	<input type="checkbox"/>
	Any others. (Please detail)	

RECOMMENDATION (please circle as appropriate)

I recommend that the application be	
1. Accepted	
2. Accepted on the conditions specified above	
3. Not accepted	
Signature of Head of School Or Authorised Signatory	Date