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| |  |  | | --- | --- | |  | A logo with text on it  Description automatically generated |   **Form No. GSF8**  (Version 4, May 2025) |  |

**PhD Transfer Application (External Applications)**

This application form is intended for students who have already commenced a postgraduate research programme in another institution and who wish to transfer to Maynooth University.

Students should only submit this form after acceptance has been agreed in principle with a prospective supervisor and department. While external PhD transfer applications may be made at any time, normally studies in Maynooth University will commence from the start of an academic year, i.e. in September.

Applicant Details

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Last name *(as on birth certificate)*: | |  | | |
| First name: | |  | | |
| Date of birth: | |  | | |
| Address *(for correspondence)*: | |  | | |
| Mobile no: |  | | Landline no: |  |
| PPS number: |  | | Email: |  |

# Supervisory and Programme Details

|  |  |
| --- | --- |
| Joining Maynooth University in which year of study *(e.g. year 2)*: |  |
| Full-time or part-time: |  |
| Proposed Supervisor: |  |
| Proposed Department |  |
| Number of years completed: |  |
| Are you in receipt of research funding? |  |
| If yes, will your funding body allow your transfer to the PhD programme in Maynooth University? |  |

# Please indicate progress to date

|  |
| --- |
| This could include data already collected, draft chapters, etc. |

If your application is successful, you will be enrolled in our Structured PhD programme, whereby you will complete some formally accredited subject-specific modules and also transferable modules.

If you wish to apply for credit waivers for modules and credits completed prior to joining Maynooth University, please provide details below. Please note that you must submit certified copies of transcripts detailing your academic history, including doctoral level modules completed in other institutions.

# Proposed Credit Waivers

***Transcripts of the results, course details and contents and assessment procedures should accompany this form***

|  |  |
| --- | --- |
| Name of module seeking a credit waive/exemption: |  |
| Credits: |  |
| Name of module completed previously: |  |
| Module code: |  |
| Credits: |  |
| Module learning outcomes: |  |
| Assessment: |  |

# Student Declaration

|  |  |
| --- | --- |
| I declare that the information given by me in this application is true and accurate and that if admitted, I will abide by the regulations of Maynooth University.  The University reserves the right not to consider applications and to cancel any offers where requested information has not been supplied or where falsified or misleading information has been supplied.  If I have a criminal conviction/(s), I confirm that I have complied with the requirements as set out in the University’s policy for applicants with criminal convictions policy at: <https://www.maynoothuniversity.ie/sites/default/files/assets/document/Convictions%20Policy.pdf> | |
| Signature: | Date: |

# Recommendation of Head of Department

|  |  |  |
| --- | --- | --- |
| Approving entry to PhD programme in Maynooth University? | |  |
| Approving credit waivers listed above? | |  |
| Comment *(if any)*: |  | |
| Name of Head of Department: |  | |
| Signature of Head of Department: |  | |
| Date: |  | |

|  |
| --- |
| **Once complete, this form and all academic transcripts must be uploaded** [**here**](https://forms.office.com/Pages/ResponsePage.aspx?id=zPVUFDW7hUa72YYh_YBVyZdFKCpc4BpMunuNqmGwjXZUMUEwMktZTVFIOEtMMDhWNFYwU1NUWlBPTyQlQCN0PWcu) |

# Approval by Director of Graduate Research

|  |  |  |
| --- | --- | --- |
| Name: |  | Comment: |
| Signature: |  |
| Date: |  |

|  |
| --- |
| **For Office Use Only: Graduate Research Academy** |

Send email of approval to the Student/Supervisor/Head/Records Office

|  |  |  |
| --- | --- | --- |
| Student | Supervisor | Head of Dept |
|  |  |  |

Send copy to the Records Office

|  |  |
| --- | --- |
| Date | Name of GRA Staff member |
|  |  |

**Use Only – Graduate Studies**

**For Office Use Only: Registry .**

|  |  |  |
| --- | --- | --- |
| Application Created on ITS: | Signed: | Date: |
| Certs Seen Updated: | Signed: | Date: |
| Transcripts noted in ITS: | Signed: | Date: |