



TUS

Application Form

First Name <i>(as per passport):</i>
Surname <i>(as per passport):</i>
Date of Birth (DD/MM/YYYY):
Gender:
Country of Birth:
Citizenship:
Permanent Address:
Address Line 1:
Address Line 2:
Address Line 3:
Phone Number:
School Email Address:
Personal Email Address:
Emergency Contact Name and Email Address:
Emergency Contact Name and Telephone Number:
Current School:
Current Program and Year:
TUS Program of Interest:

Email to Bríd Ryan, TUS Canadian Liaison Officer at Brid.Ryan@lit.ie.

I certify that I have read and understand the guidelines for filling out this form and that the information that I have provided on this form is complete and accurate. I understand that the information provided above will be used solely for the purpose of assessing my application and will be handled in accordance with TUS's Data Protection Policy and Student Privacy Statement available at the following site: <https://lit.ie/getmedia/6f45325a-d334-44f5-8f91-c5c24d1590c7/Student-Privacy-Statement.pdf>
Please note that we may need to discuss your application with your current college.

Signed: _____