

APPLICATION FORM CERTIFICATE IN VISUAL ART PRACTICE – VAP

A/C courses only

(Students applying for audit-credit courses should be 23 years of age at the time of application. Students taking assessment should note that additional details are required by the Higher Education Authority for statistical purposes.)

Title of course you are applying for _____

Course Code _____

Name (as on birth Certificate or passport) _____

Surname _____ First Name _____

Domicile (country of permanent address prior to entry to the programme of study) _____

Correspondence / Term address _____

Nationality (as it appears on your passport) _____

DOB _____ PPS _____

Email address _____

Telephone (Day/Evening) _____ Mobile _____

Gender _____

Qualifications _____ Year of Award _____

Are you a returning NCAD Student? Yes No

If yes, what is your NCAD Student number?

Are you a new NCAD Student? Yes No

List previous CEAD courses you have completed in the last 3 years _____

Do you use a sketchbook or notebook to record and develop ideas? Yes No

List the materials and equipment you use most often to make your Art and or Design work _____

Identify the sources of inspiration for your work _____

State why you wish to participate in this course _____

Do you intend to take assessment as part of this course? Yes No

Course Fee *(Students taking assessment and earning credit are required to pay the credit amount.)*

All payments MUST reference CEAD, Student name and course code with the remittance information. Failure to do so will impede your application. Bank payment details can be found on the back page of this brochure.

Full fee including registration and assessment

Paypal Postal Order Bank Draft Bank Transfer

OFFICE USE ONLY

Receipt No. _____ Amount _____

Refund _____ Date _____