Application for Research Degree Study

* Please TYPE your responses
* email the completed form to admissions@leedstrinity.ac.uk
* Keep a copy of the completed application form for your records

# Section 1

### Research Programme sought

|  |  |
| --- | --- |
| Qualification Aim (PhD or Masters by Research): | Subject Area: |
|  |  |
| Mode of Study (Full Time or Part time): | Proposed Start date: |
|  |  |
| Source of Funding(eg self-funded, employer name) |  |

### To be completed by LTU staff applicants only

|  |  |
| --- | --- |
| Name of School |  |
| Approved by Head of School or equivalent (Insert Name): |  |
| Date of Approval: |  |
| Name of proposed Lead Supervisor: |  |
| Name of Proposed co-supervisor: |  |

# Section 2

### Personal Details

|  |  |  |
| --- | --- | --- |
| Title(Mr/Mrs/Miss etc) | Forename (First name) | Surname/Family Name |
|  |  |  |
| Date of Birth (DD/MM/YY) | Gender | Previous Name(s), if different from above |
|  |  |  |

|  |  |
| --- | --- |
| Home Address | Contact address (if different for correspondence) |
|  |  |
| Postcode: | Postcode: |
| Telephone number: | Telephone number:  |
| Email address: | Email address: |
| Usual Country of Residence: |  |
| Nationality (as on passport) |  |
| Date of entry to the UK (if not UK resident from birth) |  |
| Do you require a sponsored student visa? |  |
| If you require a student Visa will you be applying from the UK or overseas? |  |
| Do you require University Accommodation? |  |

# Section 3

### Higher Education and/or Professional Qualifications

* Please list in date order with the most recent first
* You must enclose copies of your qualifications and any transcript of results with this application.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| University/Institution | Start date | End date | Qualification | Subjects | Language of instruction (for courses taken outside the UK | Award date | Result |
|  |  |  |  |  |  |  |  |

# Section 4

Please provide further details of the content of your undergraduate degree or any previous Foundation and/or Postgraduate programmes.

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# Section 5

Is English your first/native Language? Yes or No (delete as applicable)

If English is not your first/native language you will be required to demonstrate competence through IELTS.

If you have already completed IELTS Please forward evidence/certificate with this application.

If you have not yet completed, please provide the test date below:

|  |  |
| --- | --- |
| IELTS Score (certificate attached) | Yes / No |
| Test date: |  |

# Section 6

#### Other Courses and Experience relevant to this application

|  |  |  |
| --- | --- | --- |
| Date of Course | Title | Qualifications obtained or to be take (provide dates and Grades) |
|  |  |  |

#### Other information you consider relevant to your application (eg Professional or Vocational experience)

|  |  |
| --- | --- |
|  |  |

|  |  |
| --- | --- |
| Have you applied to study at Leeds Trinity University previously? | Yes / No |
| Which course and school |  |
| When did you apply |  |

# Section 7

### Employment History (most recent first)

|  |  |  |  |
| --- | --- | --- | --- |
| Name and Address of Employer | Job Title | Start date | End date |
|  |  |  |  |

# Section 8

#### Present Situation

|  |
| --- |
| Please provide a brief description of your current situation, i.e. Student (Full or part time), Employed (full or part time) |

# Section 9

#### Statement of Academic Research Interest

Please indicate why you are applying for this programme of study and give a brief description of the general research are in which you are interested, and indicate, if known, the names of your proposed supervisor(s).

**You should also submit as a separate document a research proposal (approx. 2 sides of A4) containing:**

* Proposed title of your thesis
* Aims and objectives of your research
* Proposed form of data collection
* Any specific resource requirements

|  |
| --- |
|  |

# Section 10

#### Referees

Name three people who will be providing references, at least two of whom should be qualified to comment on your educational background and potential for your chosen programme of study.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Referee 1Name: |  | Referee 2 Name: |  | Referee 3 Name: |  |
| Occupation |  | Occupation |  | Occupation |  |
| Address: |  | Address: |  | Address: |  |
| Telephone: |  | Telephone: |  | Telephone: |  |
| Email: |  | Email: |  | Email: |  |

If you are not ordinarily resident in the United Kingdom, please indicate periods of residence in the United Kingdom prior to the course.

|  |  |  |
| --- | --- | --- |
| From | To | Purpose of residence (i.e. education, employment, etc) |
|  |  |  |

# Section 11

#### Disabilities and/or special requirements

#### At Leeds Trinity University we provide a wide range of additional support to address individual needs , please see our [student support and wellbeing pages](https://www.leedstrinity.ac.uk/student-support-and-wellbeing/). Please let us know if you have a disability and/or may require additional support by placing an ‘X’ in the relevant section below, and we would be pleased to arrange an informal meeting with you to discuss any individual support requirements to enable you to participate in your programme.

|  |  |  |  |
| --- | --- | --- | --- |
| A - No disability |  | F – You have a mental health condition |  |
| B – You have a social/communication impairment  |  | G – a learning difficulty such as dyslexia |  |
| C – You are blind or have a serious visual impairment |  | H – physical impairment or mobility issues |  |
| D – are deaf or have a serious hearing impairment |  | I – disability, impairment etc not listed |  |
| E – long standing illness/health condition |  | J – two or more impairments |  |

|  |  |
| --- | --- |
| I have a disability and would like an informal meeting |  |
| I have a disability but do not require any additional support |  |

**Not compulsory,** however if you feel you would like to provide any additional information to assist us in considering your additional support needs, please detail in the space below:

|  |
| --- |
|  |

# Section 12

#### Non-European Economic Area (EEA) applicants

|  |  |
| --- | --- |
| Passport Number:  | Country of Birth: |

|  |
| --- |
| **Your immigration history. Please complete as appropriate:** |
| Have you ever been rejected/refused or overstayed a UK Visa or been withdrawn by a UK Institution? If Yes, please provide the dates and reason here: |
| Do you have a current UK visa? If yes, please provide us with your visa category, expiry date and the name and address of your current sponsor: |
| Have you ever studied in the UK previously? If yes, please provide details of the visa categories, the levels of programmes studied and the total length of study periods in the UK. Please also attached copies of your previous visa(s) |

# Section 13

**Declaration:**

Application forms which are incorrectly completed will delay the decision making process. All applicants must carefully review the completed form, in particular checking all required information has been completed in full, with certificates/transcripts and references attached.

I confirm that the information given in this application is true, complete and accurate: no information requested, or material information has been omitted. I consent to the processing of this data by Leeds Trinity University for educational purposes under GDPR.

|  |
| --- |
| **Signature** (this can be typed if you do not have an electronic signature) |
| **Date of completion**: ( Day/Month/year) |

Please send your completed application form with copies of the following documents to admissions@leedstrinity.ac.uk. Note if you do not submit all the required documents this will delay the processing of your application.

* Degree Certificates (Undergraduate and Postgraduate)
* Transcripts of results (undergraduate and Postgraduate)
* Research Proposal
* If applicable, English Language certificate, any letters of sponsorship
* References (using the form in Section 14)

# Section 14

**Referee’s report**

Confidential reference for an applicant for admission to study a Research Degree at Leeds Trinity University

Applicants should complete section A

Referees should complete and endorse Sections B-C and return the reference via email to admissions@leedstrinity.ac.uk. **The reference should be submitted by the referee and not the applicant.**

### Section A: Applicant details Section B: Referee Details

|  |  |  |  |
| --- | --- | --- | --- |
| **Family Name:** |  | **Family Name:** |  |
| **Other Name(s):** |  | **Other Name(s):** |  |
| **Title:** |  | **Title:** |  |
| **Programme applied to (PhD or MbR)** |  | **How long have you known the applicant?** |  |
|  |  | **In what capacity do you know the applicant?** |  |
|  |  | **Academic Institution in which you are/were employed.** |  |
|  |  | **Email/Telephone number:** |  |

The applicant named above has applied to study at Leeds Trinity University and has named you as a Referee. We would be most grateful if you could let us know confidentially whether in your option the applicant possesses the necessary academic and personal qualities to undertake such a course.

### Section C: Referee’s assessment form

### *How would you rate the applicant against each of the criteria listed below?*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Excellent(Student in to 5%) | Good(Student in top 20%) | Satisfactory(Student in top 50% | Poor(student not in top 50%) |
| Quality of work |  |  |  |  |
| Academic potential |  |  |  |  |
| Reliability |  |  |  |  |
| Attendance / punctuality |  |  |  |  |
| IT Skills |  |  |  |  |
| Verbal communication skills |  |  |  |  |
| Writing Skills |  |  |  |  |
| Relationship/teamwork |  |  |  |  |

In addition, it would be helpful if in the space below you could provide us with the following information, in as far as you are able:

* The standard, actual or anticipated, of the applicant’s current/previous academic work
* Your opinion and expectations of the applicant’s ability in research and writing
* Your opinion of the suitability of the proposed field of study/research are for the applicant
* Your opinion of the extent to which the applicant’s personal circumstances make them a suitable recipient of a Scholarship

|  |
| --- |
| Additional comments: |

Please continue on a separate sheet if necessary

Signed: …………………………………………………………………………. Date: …………………………………………..