

Application for Admission as a Postgraduate Student

School of Oriental and African Studies (University of London)
Thornhaugh Street, Russell Square, London WC1H 0XG



Please read the enclosed instructions before completing this form. Please use BLOCK CAPITALS and BLACK INK.

A. Personal Details

1. LAST NAME
(this is the name in which your application will be registered)

OTHER NAMES

2. SEX (please tick) Male Female

3. MARITAL STATUS (please tick) Single Married

4. DATE OF BIRTH

5. PERMANENT HOME ADDRESS

6. ADDRESS FOR CORRESPONDENCE
(Please indicate dates for which this is valid)

Postcode Telephone E-mail

7. NATIONALITY 8. COUNTRY OF PERMANENT RESIDENCE 9. PLACE OF BIRTH

10a) Is this the first time you have applied for admission to a postgraduate programme at SOAS?
Please give details of any previous application.

10b) Have you been in contact with a member of SOAS staff? If yes, please state name.

11. Please state your first language.

12. Please state languages (other than your first language) which you can read

a) fluently

b) with difficulty

13. Was your undergraduate degree taught in English? Yes No

For Office use only

To record

Date of Receipt

Ref 1

Ref 2

Transcript

Other

Signature

Please ensure all relevant sections are completed, Section H is signed and dated and all relevant documents are enclosed before sending.

B. Finance

Please note that on the International Studies and Diplomacy programme the same fees apply for UK, EU and overseas students. For details of current fees payable, please see the enclosed sheet.

14. Please state how you will meet the full expenses of your course. Please note that no student may begin a course until the appropriate fees have been paid to the School.

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C. Previous Education and Experience

15. SCHOOL

Please give details of secondary school last attended, with full address and dates.

Address

From

To

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16. UNIVERSITY

Please give details of universities or colleges attended and degrees obtained or for which you are studying, with dates and full addresses.

University or College Name & Address

From

To

Degree/Diploma

Main Field

Class/Date
of award

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17. EMPLOYMENT:

If applicable, please give details of employment since completing education with current or most recent first-please continue on a separate sheet if necessary.

Dates	Name of employer	Position and brief description of work

D. Further Information

18. Please give for our records names and addresses of your referees (please see notes).

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E. Programme and Course Details

19. DATE OF ADMISSION: September

20. APPLICATION FOR: (PLEASE TICK ONE)

MA DIPLOMA

Programme Title

Mode of Attendance:

Full-time Part-time 2 years Part-time 3 years

21. Please indicate your preferred choice of courses

Note MA candidates must select three MA ISD courses and write a dissertation, or two MA ISD courses and one elective course and write a dissertation (total of three taught courses plus dissertation).

Postgraduate Diploma candidates must select three MA ISD courses, or MA ISD courses and one elective course (total of three taught courses).

MA ISD Courses: (please tick two or three - see above)

International Relations International Economics International Law General Diplomatic Studies and Practice

Elective Courses: (please tick one or none - see above)

Please note that acceptance onto an elective course is subject to course availability and to Programme Academic Director's and course teacher's approval.

Africa China Japan Near and Middle East South East Asia South Asia
 Development Studies International Boundary Studies

Name of proposed course (please refer to the relevant booklet obtainable from the CISD)

22. How did you come to know about the SOAS programme?

23. Have you applied to any other college or university? If yes, please state which and specify department or programme.

F. Supporting Statement

Please give your reasons for wishing to take the programme indicating how you see it relating to your current and/or future professional development. Please use a separate sheet if necessary.

G. The following certificate must be signed

- a) I certify that the statements made by me on this form are correct.
- b) I confirm that, if admitted to the School, I will conform to School regulations.

U.K Data Protection Act 1998:

I agree to SOAS processing personal data contained on this form or other data which SOAS may obtain from me or other people or organisations whilst I am applying for admission. I agree to the processing of such data for any purpose connected with my studies, or my health and safety, whilst on SOAS's premises or for any other legitimate purpose.

Signature of applicant

Date

WHEN COMPLETED PLEASE RETURN THIS FORM WITH:

- Your references
- Your transcript (if required)
- Evidence of proficiency in English Language where applicable

SEND THE COMPLETE FORM TO

The Administrator
Centre for International Studies and Diplomacy
SOAS
Thornhaugh Street
Russell Square
London
WC1H 0XG