Intercollegiate Course Registration Form for External Students 2020/21

Home College: ________________________________ Level of Study (Please Circle)

First Name: __________________________________

Family Name: __________________________________ Status (Please Circle)

Date of Birth: ________________________________ Home/EU Overseas

Title: ________________________________________ If you have selected Overseas please indicate your visa type:

Telephone: __________________________________

Email: _______________________________________

Note: You must provide us with your original Passport and Visa for further verification when submitting this form.

Queen Mary Module Code | Queen Mary Module Title | Module Value | Module Level (4, 5, 6 or 7)
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| | | ______ credits |
| | | ______ credits |
| | | ______ credits |
| | | ______ credits |

Departmental Approval
Approval is required from both the teaching department at Queen Mary and your home institution.

Queen Mary Adviser | Signature | Contact Details
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Home Institution Adviser | Signature | Contact Details
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Please return the completed form to:
Student Enquiry Centre
Ground Floor, Queens’ Building
Queen Mary University of London
Mile End Road, London E1 4NS

Student Signature: _______________________________________

THE CLOSING DATE FOR THE RECEIPT OF THIS FORM IS 12th OCTOBER 2020