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Email: studentdesk@ucd.ie
Website: <http://www.ucd.ie/studentdesk>

Application for Certificate of Attendance

Name: _____
(Full name as when registered)

Student Number: _____ Date of Birth: _____
(if known) (dd/mm/yyyy)

Please tick who the certificate is for:
(If you require additional certificates, please tick appropriate boxes)

- To Whom It May Concern
- Bank Account Application
- Visa Application
- Social Welfare
- Immigration
- Garda National Immigration Bureau
- Grant Application
- Military Service
- Jury Service

If your address is required on the certificate, please ensure your address details are correct on the SIS web and tick the appropriate box(es):

Term address Permanent address Address not required

If not for current academic year, please state year(s) certificate is required to cover

Phone: _____

Email: _____

Signature of Applicant: _____

Date: _____

For Office Use Only

Date: _____

FMP Number: _____