Applicants must read the instructions carefully before completing this ‘Application for Post Graduate Admission’.

1. Application form must be filled out in **duplicate**.

2. The application form must be completed in **BLOCK LETTERS ONLY**.

3. The Application Form must be submitted with the following:

   ✓ Non-refundable application fee of TT$90.00 for applicants from Trinidad & Tobago, US$15.00 for applicants from CARICOM and US$25.00 for international applicants. Trinidad & Tobago applicants must make payments via bank deposits at any branch of FCB – Account #142-9625, prior to returning completed application forms. A bank copy of the deposit slip must be submitted with the application form. CARICOM and international applicants must make payments via international money order or international bank draft made payable to The University of Trinidad and Tobago.

   ✓ One copy of Birth Certificate

   ✓ One copy of **ALL** relevant certificates; tertiary level, etc.

4. Applicants must present **ORIGINAL** certificates upon acceptance.

5. Only **OFFICIAL** transcripts will be accepted. Transcripts must be mailed to the following address:
   
   Department of Student Affairs
   The University of Trinidad and Tobago
   O’Meara Campus
   Lots # 74-98 O’Meara Industrial Park
   Arima

6. Application forms are available online at [www.utt.edu.tt](http://www.utt.edu.tt) or can be collected at, returned to or mailed to the following locations:

   The University of Trinidad and Tobago
   Point Lisas Campus
   Esperanza Road, Brechin Castle
   **COUVA**

   The University of Trinidad and Tobago
   San Fernando Technical Institute
   Toruba Road
   **SAN FERNANDO**

   The University of Trinidad and Tobago
   John Donaldson Technical Institute
   Wrightson Road
   **PORT OF SPAIN**

7. For any further information, please contact us at:
   
   UTT, O’Meara Campus
   Lots # 74-98 O’Meara Industrial Park, Arima
   (868) 642 – 8888 Ext. 21077 or visit our website at [www.utt.edu.tt](http://www.utt.edu.tt)

8. GATE is accessible by all citizens of Trinidad & Tobago. GATE covers 50% **tuition fee** for all post graduate programmes.

9. Applicants for all M.Phil and PhD programmes must contact The University of Trinidad and Tobago, Department of Student Affairs – Graduate Admissions at 642 – 8888 ext 21077 for an appointment.
THE UNIVERSITY OF TRINIDAD AND TOBAGO

APPLICATION FOR POST GRADUATE ADMISSION
(M.Phil & PhD PROGRAMMES)

All applicants are required to read the instructions and information, before completing this application form.

1. Name

Surname ____________________________ First Name ____________________________ Middle Name(s) ____________________________

2. Date of Birth:

_____/_____/______
Year Month Day

3. Gender

□ Male
□ Female

4. Nationality

□ Trinidad and Tobago
□ Other (Specify) ____________________________

5. Permanent Address

__________________________________________

__________________________________________

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6. Mailing Address (if different from 5)

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7. Contact Information

Telephone # (Home) ____________________________ Telephone # (Work) ____________________________ Ext:

( ) - ( ) -

Telephone # (Mobile) ____________________________ Telephone # (Other) ____________________________

( ) - ( ) -

Email Address ____________________________ Telephone # (Fax) ____________________________

( ) -


11. Emergency Contact Information (Indicate individual to contact in case of emergency)

Surname ____________________________ First Name ____________________________ Relationship to Applicant ____________________________

Address ____________________________

Telephone # (Home) ____________________________ Telephone # (Work) ____________________________ Ext:

( ) - ( ) -

Telephone # (Mobile) ____________________________ Email Address ____________________________

( ) -

FOR OFFICIAL USE ONLY

Student Affairs Department

Application Received _______/_____/______ Received By: ____________________________

Year Month Day

Academic Programmes

Application Received _______/_____/______ Received By: ____________________________

Year Month Day

Post Graduate Board

Application Received _______/_____/______ Received By: ____________________________

Year Month Day

Page 2 of 8
12. PROGRAMMES OFFERED

- Please indicate your choice of UTT post graduate programme (M.Phil or PhD) by:
  
  a. Ticking (√) the appropriate box to indicate the programme level.
  
  b. Writing your area of research. Please refer to the list of available areas of research or by discussing alternative research options with the relevant Programme Professor.

- M.Phil and PhD applicants must get approval in writing, from the Programme Professor of the respective programme for their mode of attendance.

<table>
<thead>
<tr>
<th>Programme Level</th>
<th>Area of Research</th>
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<tbody>
<tr>
<td>☐ M.Phil</td>
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<tr>
<td>☐ PhD</td>
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</table>

13. ACADEMIC RECORD

List all universities, colleges and professional schools attended. It is your responsibility to request official transcript(s) from each school. Use extra sheets for additional information. Specify other name(s) you may have used on transcript(s).

a. Tertiary Level

<table>
<thead>
<tr>
<th>Date</th>
<th>Name and Address of Institution</th>
<th>Examining Body/Level</th>
<th>Area of Study</th>
<th>Degree &amp; Class of Degree</th>
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<tbody>
<tr>
<td>From (mm/yyyy)</td>
<td>To (mm/yyyy)</td>
<td>Examinining Body/Level</td>
<td>Area of Study</td>
<td>Degree &amp; Class of Degree</td>
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### b. Other Professional Qualifications

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<tr>
<th>Date</th>
<th>Name and Address of Institution</th>
<th>Examining Body/Level</th>
<th>Programme / Area of Study</th>
<th>Qualification received</th>
<th>Grade / Class</th>
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### 14. WORK EXPERIENCE RECORD

Please include both paid and unpaid work experience.

<table>
<thead>
<tr>
<th>Date</th>
<th>Job Title / Activity</th>
<th>Employer / Organisation Name &amp; Address</th>
<th>Main Tasks/ Responsibilities</th>
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</table>
### 15. Career Objectives
Please state the reason for your interest in the programme selected.

---

### 16. Other Information
Please state briefly any other information which you feel may support your application or successful completion of programme.

---

17. Are you a past student of UTT?  Yes [ ]  No [ ]

If yes, please list your UTT student I.D. No. ………………………………

### 18. Research Proposal Summary
In about 150 words, summarize the project in terms of:

- the identified problems
- the identified opportunities being addressed
- the realizable benefits to stakeholders (likely inputs and outcomes) of the research
- the innovation and how it adds value to existing knowledge.

Title:
Proposed Supervisor:

Name:  
Position:  

Proposed Supervisor Comments: 

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
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Signature of Proposed Supervisor  ______________________________  Year  /  Month  /  Date

Page 7 of 8
18. **Declaration and Signature**
I hereby certify that the information that I have provided is accurate. I understand that any misrepresentation on my part may result in the rejection of my application or rescinding of my registration by the University of Trinidad and Tobago.

_________________________________    __________/______/____________

Signature of Applicant    Year    Month    Date

FOR OFFICIAL USE ONLY

<table>
<thead>
<tr>
<th>Documents Received</th>
<th>Receipt Information</th>
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<tbody>
<tr>
<td>□ Birth Certificate</td>
<td>Receipt # ___________</td>
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<tr>
<td>□ Transcript</td>
<td>Received by ___________</td>
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<tr>
<td>□ Other (specify)</td>
<td>Date Received <em><strong><strong>/</strong></strong></em>/______</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>YY    MM    DD</td>
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<tr>
<td>Other (specify)</td>
<td>YY    MM    DD</td>
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</tbody>
</table>

Documents checked by (Signature)            Date

FOR OFFICIAL USE ONLY

Post Graduate Board

Comments:

Approved by:

_________________________________    ____________________________    ___________________________

Chairman of the Board    Secretary to Board    Member of Board

_____/______/______    _____/______/______    _____/______/______

YY    MM    DD    YY    MM    DD    YY    MM    DD