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| **Intercollegiate Registration Form (IRF1) 2019-20** *For use by students of other University of London institutions wishing to register to take modules at King’s College London* | KingsLogoBlack |

**Application to register for modules at King’s College London**

**Please note**, you must have the approval of your Home Institution before submitting this form, otherwise you may be charged KCL fees.

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| **Home Institution:** (UCL, SOAS etc) | Select your Institution. |

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| **Surname**: | Click here to enter text. | **Forenames:** | Click here to enter text. |
| Title: | Choose an item. | Gender: | Click here to enter text. |
| Date of Birth | Click here to enter a date. | Nationality: | Click here to enter text. |

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| Programme and Year of Study: | Click here to enter text. |
| Student Number at Home Institution: | Click here to enter text. |
| Local Postal Address: | Click here to enter text. |

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| Telephone: | Click here to enter text. | Email: | Click here to enter text. |

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| **Fee Status** at Home Institution**:**  | Choose an item. |

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| **I wish to register for the following modules: (PLEASE COMPLETE ALL FIELDS)**  |

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| **King’s Module Code**(eg 5AAH2013) | **Module Title** | **King’s Dept****(eg English)** | **Credit Value**  | **Period** |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. | Choose an item. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. | Choose an item. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. | Choose an item. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. | Choose an item. |

**Approval of Home Institution**

I confirm that this student has our approval to undertake the modules listed above at King’s College London.

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| Name: | Click here to enter text. | Date: | Click here to enter text. |
| Signature: Click here to enter text. |

**Please email or submit the completed Word Document form to the KCL Department as instructed by them**. Failure to submit this form by early October may result in you not being allocated a seat in the examination, or not being allowed access to KCL facilities. Where modules are being selected from more than one King’s department, approval will be required from each of these departments

**King’s College London Acceptance:**

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| **Department 1:**  |  |
| Name Click here to enter text. | Date Click here to enter text. |
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| **Department 2:**  |  |
| Name Click here to enter text. | Date Click here to enter text. |
|  |  |
| **Department 3:**  |  |
| Name Click here to enter text. | Date Click here to enter text. |
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