



Ollscoil na hÉireann
National University of Ireland

NUI MATRICULATION CERTIFICATION FORM

(To be completed by a qualified professional)

RE: APPLICATION FOR EXEMPTION FROM IRISH AND/OR A LANGUAGE OTHER THAN ENGLISH (i.e. TO MEET THE NUI THIRD LANGUAGE REQUIREMENT) ON THE BASIS OF A LEARNING DIFFICULTY IN RELATION TO LANGUAGE ACQUISITION (i.e. DYSLEXIA)

Note for the information of professional completing this form:

Students seeking to matriculate in the National University of Ireland are required to present six Leaving Certificate subjects, including Irish, English and a third language. A student who is certified by a qualified professional as having a dyslexic condition causing such a learning difficulty in relation to language acquisition as to warrant exemption may be exempted from the requirement to present Irish and/or a language other than English for matriculation. This means that the student may substitute other Leaving Certificate subjects in place of the Irish and another language. It is drawn to the attention of professionals completing this form that the purpose here is to make special provision for students who in all other respects can be expected to meet the standards required for NUI matriculation but, who because of their learning difficulty in relation to language acquisition should not be required to present the subject 'Irish' or another language apart from English as a Leaving Certificate subject. It is not the intention that students should qualify for exemption on the basis of poor standards of literacy.

Applicant's Name: _____

1. In your professional opinion, has this student a dyslexic condition causing such a learning difficulty in relation to language acquisition as to warrant exemption?

YES	
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NO	
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2. On what evidence is this opinion based? Please indicate here the results of any relevant tests which you have carried out in assessing the student.

3. In your view, should this candidate be exempted from Irish for NUI matriculation?

YES	
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NO	
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Name, Qualifications and Address: _____

Signature: _____ Date: _____

N.B. PLEASE NOTE THAT THIS FORM SHOULD BE RETURNED WITH THE COMPLETED APPLICATION FORM. THIS FORM IS PARTICULARLY RELEVANT TO STUDENTS IN SCHOOLS NOT COVERED BY DES CIRCULAR LETTER M10/94.