

## APPLICATION FORM FOR ADMISSION AS A POSTGRADUATE STUDENT

Markfield Institute of Higher Education, Ratby Lane, Markfield, Leicestershire, LE67 9SY, UK.

Tel: 00 44 1530 244 922 Fax: 00 44 1530 243 102

Email: [mihe@islamic-foundation.org.uk](mailto:mihe@islamic-foundation.org.uk) Website: [www.mihe.org.uk](http://www.mihe.org.uk)

Please use BLOCK CAPITALS.

### 1. PERSONAL DETAILS

TITLE (Mr/Mrs/Miss/Ms) .....

SURNAME (FAMILY NAME) .....

FORENAME .....

PERMANENT HOME ADDRESS .....

.....

.....

Postcode: ..... Telephone: .....

Fax: ..... Email: .....

CORRESPONDENCE ADDRESS - *if different* .....

.....

.....

Postcode: ..... Telephone: .....

Fax: ..... Email: .....

STATUS: Single  Married  DATE OF BIRTH ...../...../.....

NATIONALITY (*as stated in passport*) .....

COUNTRY OF BIRTH .....

COUNTRY OF PERMANENT RESIDENCE .....

SOURCE OF FEE PAYMENT (*please specify clearly who will pay the fees*)

.....

DISABILITIES/SPECIAL NEEDS

.....

### 2. COURSE DETAILS

DATE OF ADMISSION – September .....

APPLICATION FOR: PgCert  PgDip  MA  MPhil/PhD

*For MPhil / PhD applications you must attach a research proposal of 1000 words. No MPhil / PhD application will be considered without the research proposal.*

MODE OF STUDY: Part Time  Full Time

MA OPTIONAL COURSE UNITS

*For PgCert, PgDip and MA applications please indicate choice of course units. See the prospectus for a full list of course units.*

*PgCert requires 60 credits*

*PgDip requires 120 credits*

*MA requires 180 credits (including Dissertation)*

*Major Units (30 credits) Minor Units (15 credits)*

Major Units (30 credits)

Minor Units (15 credits)

1. .... 1. ....

2. .... 2. ....

3. ....

MPhil / PhD proposed research topic: .....

3. QUALIFICATIONS

A) SECONDARY EDUCATION:

*(Please provide copies of certificates and transcripts)*

PLEASE GIVE DETAILS OF QUALIFICATIONS OBTAINED AT HIGH SCHOOL / SECONDARY SCHOOL

Name of Qualification	Examining Body	Subject(s)	Grade / Percentage	Exam Date (month/year)
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B) HIGHER EDUCATION:

PLEASE GIVE DETAILS OF UNIVERSITIES / COLLEGES ATTENDED

*(including degrees obtained / courses followed, or which are still in progress)*

.....  
.....  
.....  
University / College .....  
Address .....  
.....  
.....  
From ..... To .....  
Course / Degree .....  
Result / Overall Grade .....

C) EMPLOYMENT RECORD:

PLEASE GIVE DETAILS OF ANY RECENT EMPLOYMENT / WORK EXPERIENCE

Employer .....  
Address .....  
.....  
.....  
Nature of Work .....  
From ..... To .....

PLEASE STATE YOUR REASONS FOR APPLYING FOR THIS COURSE AND AT THIS INSTITUTION  
*(use additional sheet if necessary)*

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PLEASE STATE YOUR FIRST LANGUAGE .....

PLEASE STATE OTHER LANGUAGES YOU KNOW INDICATING LEVEL OF PROFICIENCY

..... Excellent/Good  Working Knowledge  Reading/Writing

..... Excellent/Good  Working Knowledge  Reading/Writing

..... Excellent/Good  Working Knowledge  Reading/Writing

..... Excellent/Good  Working Knowledge  Reading/Writing

*Overseas applicants are required to show proof of proficiency in English Language (minimum level: IELTS 6.5).*

PLEASE STATE WHICH ENGLISH LANGUAGE EXAMINATIONS YOU HAVE PASSED

.....

WOULD YOU BE INTERESTED IN ANY OF THE FOLLOWING ORIENTATION COURSES?

*(to be held in August and September)*

English Language  Qur'anic Arabic  Fundamentals of Islam  Research Methodology

*(Please note that depending on your level of proficiency, such courses may be a compulsory requirement)*

#### 4. NEXT OF KIN

PLEASE GIVE DETAILS OF NEXT OF KIN OR SOMEONE WHO CAN BE CONTACTED IN CASE OF EMERGENCY

Name: .....

Address: .....

.....

Postcode: ..... Country: .....

Telephone: ..... Fax: .....

Email: .....

#### 5. DECLARATION

I confirm that the information supplied by me on this form is correct. I also agree that should I be admitted to the Markfield Institute of Higher Education, I will adhere to the Regulations of the Markfield Institute of Higher Education and the Academic Regulations of the University of Loughborough.

SIGNATURE OF APPLICANT ..... DATE .....

##### What to include with this form

- Research proposal (for MPhil / PhD)
- Proof of proficiency in English Language (for overseas applicants)
- Photocopy of certificates
- Evidence of name and date of birth (e.g. photocopy of relevant page of passport)
- Any extra sheets used for additional information

*Please forward the separate confidential statement request forms to two referees. The referees should complete and send the forms back to the MIHE directly.*

**This application form, once complete, should be returned to:**

**The Registrar  
Markfield Institute of Higher Education  
Ratby Lane, Markfield, Leicestershire LE67 9SY, UK.**

# The Markfield Institute of Higher Education

Validated by Loughborough University

## REQUEST FOR CONFIDENTIAL STATEMENT

**FROM REFEREE 1**

Markfield Institute of Higher Education, Ratby Lane, Markfield, Leicestershire, LE67 9SY, UK.

Tel: 00 44 1530 244 922 Fax: 00 44 1530 244 946

Email: [mihe@islamic-foundation.org.uk](mailto:mihe@islamic-foundation.org.uk) Website: [www.mihe.org.uk](http://www.mihe.org.uk)

**In your statement you should consider the following information about the candidate:**

- suitability for the course
- intellectual qualities including the ability to synthesise material from different sources and to articulate arguments
- personal qualities
- ability to work alone for some time
- ability to follow own initiative
- ability to co-operate with others in academic pursuits
- interests outside academic life
- proficiency in English (if the student is an overseas applicant)

*Your statement will be treated as strictly confidential unless you specifically give permission to disclose the contents.*

CANDIDATE'S FULL NAME .....

PROPOSED COURSE .....

NAME OF REFEREE ..... POSITION HELD .....

ADDRESS .....

.....

.....

Postcode: ..... Telephone: ..... Fax: .....

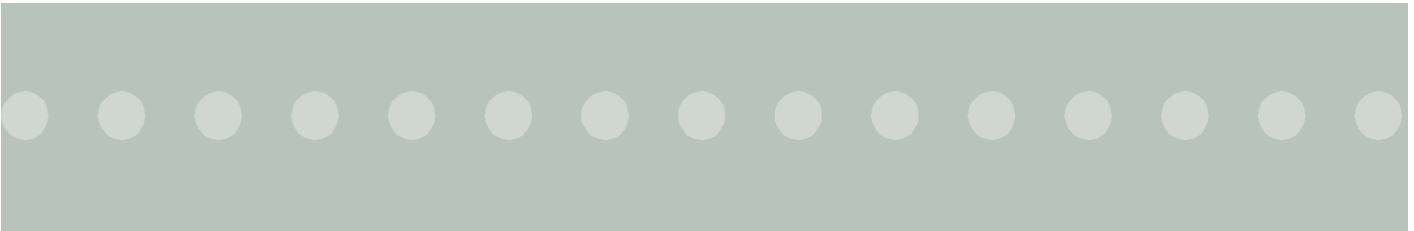
CONFIDENTIAL STATEMENT

*(use additional sheet if necessary)*

SIGNATURE ..... DATE .....

OFFICIAL STAMP

*Once complete, please send this form directly to 'The Registrar' at the above address.*



**OFFICE USE ONLY:**

Date of Receipt

Reference Number

Acceptance Code

Interview

Tutor

Fees

Remarks

# The Markfield Institute of Higher Education

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## REQUEST FOR CONFIDENTIAL STATEMENT

**FROM REFEREE 2**

Markfield Institute of Higher Education, Ratby Lane, Markfield, Leicestershire, LE67 9SY, UK.

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CANDIDATE'S FULL NAME .....

PROPOSED COURSE .....

NAME OF REFEREE ..... POSITION HELD .....

ADDRESS .....

.....

.....

Postcode: ..... Telephone: ..... Fax: .....

CONFIDENTIAL STATEMENT

*(use additional sheet if necessary)*

SIGNATURE ..... DATE .....

OFFICIAL STAMP

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