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|  | **School of Pharmacy, QUB****Information Session Application Form** |

**PLEASE PRINT CLEARLY**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Preferred date to attend Information Session:**

**Friday 26 January**

**Friday 2 February**

**Friday 23 February**

**Are you interested in:**

**Pharmacy (MPharm)**

**BSc in Pharmaceutical Sciences / Pharmaceutical Biotechnology**

**Please provide details of the GCSEs, AS levels and A Levels that you hold or are studying for:**

**Please return the completed form by post to:**

**Dr Heather Anderson, School Manager, School of Pharmacy, Medical Biology Centre, Lisburn Road, Queen’s University Belfast, BT9 7BL.**

**Or, email to:** **h.anderson@qub.ac.uk**

**Please provide details of what Universities and course you are planning to apply to:**

**Please describe why you would like to attend the Information Session in the School of Pharmacy:**

**Please provide details of any work experience you have gained so far related to Pharmacy:**

**Please provide details of which Universities and courses you plan to apply to:**

**Please email your completed application form to:**  n.magill@qub.ac.uk

**or post to:**

Nicola Magill

School of Pharmacy

Queen’s University Belfast

97 Lisburn Road

Belfast, BT97BL

**Forms must be returned by Friday 15 December 2017**