DUBLIN UNIVERSITY
Seanad Electoral Register: Form of Claim

All graduates of the University of Dublin who are Irish citizens are eligible to register as University Electors.
The Register is published annually on **June 1st**. The last day for adding new names in any year is **February 26th**.

Please fill in the Form of Claim and return to:
SEANAD ELECTORAL OFFICE, University of Dublin, House 5, Trinity College, Dublin 2.

SECTION ONE

If you are **not eligible**, fill in **SECTION ONE ONLY** and return the form.

I **AM NOT** an Irish citizen [X] Signature: ____________________ ***(NOT ELIGIBLE)***

Student Number : | | | | | | | | | Date of Birth: D D M M Y Y Y Y

Surname: ______________ Other Names: ______________

SECTION TWO

SEANAD ELECTORAL (UNIVERSITY MEMBERS) ACT, 1937

FORM OF CLAIM TO BE REGISTERED AS A UNIVERSITY ELECTOR

Are you a citizen of Ireland? Yes [X] No [X]

Student Number : | | | | | | | | | Date of Birth: D D M M Y Y Y Y

Surname: ______________ Other Names: ______________

Permanent address at which you were normally resident on the 15th day of November last:

____

____

State the address to which you desire the ballot paper to be sent to (*this should be the same as your permanent address), other than in exceptional circumstances):*

____

____

Any false declaration for the purpose of this claim will render the claimant liable to a penalty.

(**NOTE:** Any change in address should always be notified to the Seanad Electoral Office of the University promptly; otherwise the ballot paper may be lost, and your name removed from the Electoral Register).

SECTION THREE

State the degree (other than an honorary degree) with the date on which it was conferred, in respect of which the franchise is claimed (or particulars, including date of any foundation/non-foundation scholarship obtained).

Degree: ______________________________ Date: D D M M Y Y Y Y

Foundation/Non-Foundation Scholarship: [X] Year: Y Y Y Y

I declare that the particulars given in this Form of Claim are true and accurate to the best of my knowledge and belief, and I hereby claim to be registered as a University Elector for the Constituency of Dublin University.

SECTION FOUR

Signed: ______________________________ Date: D D M M Y Y Y Y

Do you agree to have your name included in the edition of the Register available to the public? **Note:** that this may be used for commercial purposes. [X] Yes [X] No

Data Protection

The data collected on this form are being obtained by the University of Dublin, Trinity College, for the purposes of maintaining the Seanad Eireann Electoral Registers for the Dublin University constituency. Personal data will not be processed, other than as permitted by law. Those providing personal data have the right to access those data and the right to rectify them. Personal data will be processed by the University of Dublin, Trinity College, in accordance with the Data Protection Acts 1988 and 2003.