

**APPLICATION FORM FOR ADMISSION TO THE UNIVERSITY OF CAMBRIDGE  
GRADUATE COURSE IN MEDICINE: 2019 ENTRY**

|   |                                     |                     |                          |
|---|-------------------------------------|---------------------|--------------------------|
| Surname:  |                                     | Title:              |                          |
| Given Names (underline used name):  |                                     |                     |                          |
| <p><i>Please read the notes below before completing the form.<br/>Be aware that false or misleading information is fraud.</i></p> | College preference (tick only one): | Hughes Hall         | <input type="checkbox"/> |
|   |                                     | Lucy Cavendish      | <input type="checkbox"/> |
|   |                                     | Wolfson             | <input type="checkbox"/> |
|   |                                     | St. Edmund's        | <input type="checkbox"/> |
|   |                                     | Open: no preference | <input type="checkbox"/> |

**GENERAL**

- \*Please complete **ALL** sections of this form in a **black font**.
- \*All information provided is processed in accordance with data protection legislation.

**WHEN TO APPLY & CLOSING DATES**

- \*Apply in the year before intended admission; deferred-entry applications will not be considered; only applicants classified as Home/EU fee status are eligible.
- \*Submit the UCAS form **on-line** through the UCAS website: [www.ucas.com/apply](http://www.ucas.com/apply) by the **15 October**. Your UCAS application must contain an academic reference.
- \*E-mail **this** form, and all supporting documents, combined into **one** pdf document, by **22 October**.

**REFERENCE**

- \*Your referee **must** be an individual other than your UCAS referee.
- \*Contact your proposed referee as soon as possible to confirm that they are willing to provide a reference and to explain the application procedure. Complete and e-mail a copy of your UCAS Personal Statement with the Reference Form to your referee in good time, to ensure that they are able to e-mail their contribution by the closing date.
- \*Your referee should e-mail the completed, signed, reference to your chosen College or the Clinical School (Open applications) to be received **by 22 October**, in one pdf document.

**COLLEGE PREFERENCE & CONTACT DETAILS**

Submit your Cambridge application to be received **by 22 October** by e-mail in one pdf document to one of the following Colleges, or make an Open application:

- Hughes Hall** e-mail [admissions@hughes.cam.ac.uk](mailto:admissions@hughes.cam.ac.uk)
- Lucy Cavendish College** (women only) e-mail [lcc-admissions@lists.cam.ac.uk](mailto:lcc-admissions@lists.cam.ac.uk)
- Wolfson College** e-mail [ugadministrator@wolfson.cam.ac.uk](mailto:ugadministrator@wolfson.cam.ac.uk)
- St. Edmund's** e-mail [admissions@st-edmunds.cam.ac.uk](mailto:admissions@st-edmunds.cam.ac.uk)
- Open Applications** (no College preference) e-mail [CSMAdmissions@medschl.cam.ac.uk](mailto:CSMAdmissions@medschl.cam.ac.uk)

If you choose to submit an open application, this will be allocated to one of the four colleges for processing (and if you are offered a place on the course it may be at a different college). If you submit a college application and are offered a place on the course, but the college to which you have applied is oversubscribed, you may be allocated to another college.

**INTERVIEWS**

- \*Interviews for the (approximately 80) short-listed applicants for 2019 entry will take place on 20 & 21 November 2018. The interview is in the multiple mini interview format (normally 10 stations), with each station lasting 5 minutes. The interviewers include clinicians, medical sciences experts and lay academics.

**CHECKLIST**

Admissions Documents check-list, please send **all** documents combined into **one** pdf document:

- \*Your completed Application Form
- \*Your University transcript (**in English**) for completed years of your first degree
- \***All** academic examination certificates: from GCSE (or equivalent) to higher degree
- \*A copy of your passport

Applicant Surname

Subject

**MEDICINE A101**

UCAS Number

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**Applicants are required to complete this section in BLOCK CAPITALS.**

## SECTION A: EDUCATION

### ***Do you meet the academic course requirements?***

i.e. the following, or their widely recognised equivalent (e.g. the International Baccalaurate or Scottish Highers)

#### ***A level Chemistry***

Applicants must have A Level Chemistry (normally passed at grade A or above within seven years of entry (ie no earlier than 2012)).

**Yes/ No**

#### ***Other A levels***

Applicants must have (in addition to A level Chemistry) one of Biology/Human Biology, Physics or Mathematics (at A or AS level).

**Yes / No**

#### ***Basic numeracy and literacy skills as demonstrated by the following, or their widely recognised equivalent***

GCSE Mathematics at grade C or above

**Yes / No**

GCSE English Language at grade C or above

**Yes / No**

If you have answered no to any of the above, please explain how you intend to meet the conditions (include any relevant correspondence)

#### ***Did you obtain A-levels before 2010?***

If so, please provide details of each of the A-level units you completed, and the UMS score for those units.

## SECTION B: FITNESS TO PRACTISE

### Declaration of Fitness to Practice:

You should be aware that you must have the capacity to achieve the 'outcomes for graduates' documented by the General Medical Council (June 2018).

A criminal conviction may debar you from entering the medical profession – anything you feel may be relevant must be declared.

Successful applicants will be required to complete a DBS Application form from the Disclosure and Barring Service, Disclosure Scotland, or equivalent.

If you are made an offer that you accept as 'Firm' or 'Insurance', the University will send you the appropriate documents to complete.

- Have you ever been convicted of any criminal offence, bound over or cautioned? **Yes / No**
  
- Have you ever been cautioned or disciplined by, or struck from, the register of any healthcare regulatory body (including spent convictions)? **Yes / No**
  
- Have you ever failed to progress on a medical course at any other institution? **Yes / No**

If you have answered **yes** to any of the above, please provide further information:

### SECTION C: HEALTH-CARE EXPERIENCE

Please summarise in bullet-pointed chronological order all work experience (paid or unpaid) that you have obtained in a healthcare setting, and other relevant non-academic activities undertaken since leaving school. These may include working or volunteering in any context that provided you with direct contact with ill, disabled, distressed, challenging or disadvantaged individuals or groups. After each bullet point, please explain briefly what you learned from the experience and/or how it informed your commitment to a career in medicine.

| From: | To: | Description of activity: |
|-------|-----|--------------------------|
|       |     |                          |

## SECTION D: REFERENCE

Please give details of a person who has agreed to give you a reference; this **must** be a different referee to the one who provided your reference on your UCAS application. Send the referee (by e-mail) the Reference Form and a copy of your UCAS Personal Statement. A copy of the completed reference form should be emailed **by the referee** direct to either your preferred College or, for Open applications, the Clinical School by 22 October. The reference should be e-mailed in **one** pdf document. Please advise them where they should send the reference to.

Your application will **not** be considered if the reference has not been received by 22 October.

|               |
|---------------|
| Referee Name: |
| Address:      |
| Telephone:    |
| E-mail:       |

## DECLARATION

- I confirm that the information I have given on this Application form and the Personal Statement & Reference Form is true, complete and accurate and no information requested or other material information has been omitted.
- I have read the application notes and undertake to be bound by the terms set out in them.
- I give my consent to the processing of my data by the University and College(s).
- I accept that, if I do not fully comply with these requirements, the University and/or College(s) shall have the right to cancel my application and I shall have no claim against the University or college in relation thereto.

Signature of applicant:

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Date:

*Office Use only:*

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**Reference Form:** to be completed by the Referee

|  |       |        |  |
|--|-------|--------|--|
| Referee Initials & Surname:            |       | Title: |  |
| Position:                              |       |        |  |
| Organisation:                          |       |        |  |
| Applicant Name:                        |       |        |  |
| How long have you known the Applicant? | Years |        |  |
| In what capacity?                      |       |        |  |

**Notes for Referee:**

- As required by data protection legislation, copies of their references may be provided to applicants on request although information which identifies the referee may be withheld. This applies even where references are marked 'confidential' or 'do not disclose'.
- Information about the course is given on the University Web-site:  
<http://www.undergraduate.study.cam.ac.uk/courses/medicine-graduate-course>
- Comments on all areas are important as they contribute to the selection process.
- The application will **not** be considered if your Reference is not received by the deadline **22 October**.
- Please comment on the Applicant in terms of the UCAS Personal Statement.

|  |                                 |
|--|---------------------------------|
| <i>The Applicant's academic ability:</i> | <i>Score (office use only):</i> |
|--|---------------------------------|

|   |                                 |
|---|---------------------------------|
| <i>The Applicant's teamwork and communication skills:</i> | <i>Score (office use only):</i> |
|---|---------------------------------|

|   |                                 |
|---|---------------------------------|
| <p>Any personal characteristics which you feel make the Applicant well suited for a career in the medical profession:</p> | <p>Score (office use only):</p> |
|---|---------------------------------|

|   |  |
|---|--|
| <p>Do you know of any reason why the Applicant may <b>not</b> be suited for a career in medicine?</p> |  |
|---|--|

|  |  |              |
|--|--|--------------|
| <p>Applicant Name:</p>                       |  |              |
| <p>Referee <b>handwritten</b> Signature:</p> |  | <p>Date:</p> |

Please e-mail the completed reference form by **22 October 2018**, in **one** pdf document to the College/Clinical School, see contact details below. The applicant should have advised if they have made an Open or a College application (if they have not please e-mail send the reference to the Open applications e-mail address). The reference **must** be e-mailed using your professional e-mail address (not a personal e-mail address).

|   |   |
|---|---|
| <p><b>Hughes Hall</b></p>                 | <p><a href="mailto:admissions@hughes.cam.ac.uk">admissions@hughes.cam.ac.uk</a></p>             |
| <p><b>Lucy Cavendish College</b></p>      | <p><a href="mailto:lcc-admissions@lists.cam.ac.uk">lcc-admissions@lists.cam.ac.uk</a></p>       |
| <p><b>Wolfson College</b></p>             | <p><a href="mailto:ugadministrator@wolfson.cam.ac.uk">ugadministrator@wolfson.cam.ac.uk</a></p> |
| <p><b>St. Edmund's College</b></p>        | <p><a href="mailto:admissions@st-edmunds.cam.ac.uk">admissions@st-edmunds.cam.ac.uk</a></p>     |
| <p><b>Open: no College preference</b></p> | <p><a href="mailto:CSMAdmissions@medschl.cam.ac.uk">CSMAdmissions@medschl.cam.ac.uk</a></p>     |