* About you

* Medical conditions

* Your studies

* Further information

* Declaration

* Confirmation

Please ensure you read the Medicine Summer School 2020 guidance (.pdf) notes prior to filling out the application form.

Required fields marked with \*

First name \*



Last name \*



Address line 1\*



Address line 2



Address line 3



County\*



Postcode\*



DOB (DD/MM/YY)\*



Mobile telephone number\*



Email\*



How would you describe your ethnic origin\* (select from drop down box)

Ethnic Origin\*



* White – British
* White – Irish
* Other White Background
* Gypsy or Traveller
* Black or Black British – Caribbean
* Black or Black British – African
* Other Black Background
* Asian or Asian British – Indian
* Asian or Asian British – Pakistani
* Asian or Asian British – Bangladeshi
* Chinese
* Other Asian background
* Mixed – White and Black Caribbean
* Mixed – White and Black African

Required fields marked with \*

To ensure that the University can provide appropriate support when on campus, we ask all applicants who may require additional support to outline their specific needs. This information will NOT be used in any way to assess eligibility to attend the Medicine Summer School.

Do you consider yourself to have a disability? (please tick one or more)

No known disability  
  
Mental health condition  
  
Specific learning disability  
  
Physical impairment or mobility  
  
Deaf or serious hearing impairment  
  
General learning disability  
  
Blind or serious visual impairment  
  
Cognitive impairment  
  
Long-standing illness or condition  
  
Other type of disability



Please provide details of support you may require as part of the Medicine Summer School. This information will be shared with University of Sunderland Student Services so that we can consider and implement necessary reasonable adjustments.



**Dietary requirements and allergies:**

Please detail below any dietary requirements and/or food allergies that you have.



**Emergency contact details**

Please provide the details of someone who we could contact in case of an emergency (e.g. person with parental responsibility)

**Full name\***

**Relationship to you\***

Relationship to you\*



**Telephone number\***

Required fields marked with \*

Name of current school/sixth form/college\*

School/sixth form/college\*



Name of school where you obtained your GCSEs (if different)

School name



**Please read the following before completing the below information:**

In order to be eligible for the Medicine Summer School you must be studying A Levels. We do accept some equivalent qualifications – please refer to the Medicine Summer School 2020 guidance notes for further information.

**A Levels**

Are you currently studying A Levels?\*

A Levels?\*



We require A Levels in three subjects, including **Biology** or **Chemistry**, plus another designated science subject (**Biology, Chemistry, Physics, Maths/Further Maths/Statistics**). **MFMS**from

Please detail below the three subjects you are studying:



If you are not studying A Levels, please detail below the qualifications you are studying and the subject. For example, International Baccalaureate or Scottish Highers.



**GCSEs**

You must hold the following GCSEs

5 subjects at grade A/7 with a minimum of grade B/6 in **Maths, English Language, Biology, Chemistry** and **Physics** (**Dual Award Science** is accepted).

Please detail below your GCSE subjects and the grade you achieved:

Subject\*



Grade\*



Subject\*



Grade\*



Subject\*



Grade\*



Subject\*



Grade\*



Subject\*



Grade\*



Subject



Grade



Subject



Grade



Subject



Grade



Subject



Grade



Subject



Grade



Subject



Grade



Subject



Grade



Subject



Grade



Are you resitting any GCSEs\*?

GCSEs\*



If 'Yes', which subjects are you resitting? Please note, you would have to achieve the required grades prior to applying for MBChB Medicine.



Back

Required fields marked with \*

First name \*



Last name \*



Address line 1\*



Address line 2



Address line 3



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Postcode\*



DOB (DD/MM/YY)\*



Mobile\*



Email\*



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**Please read the following before completing the below information:**

In order to be eligible for the Medicine Summer School you must be studying A Levels and hold certain other, specific qualifications **(please refer to the Medicine Summer School guidance notes for further information)**

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We require A Levels in three subjects, including **biology** or **chemistry**, plus another designated science subject (**biology, chemistry, physics, maths/further maths/statistics**). Please detail below the three subjects you are studying:



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Back

We are passionate about ensuring fair access for all students, regardless of background. We are particularly interested in attracting students from groups which are currently underrepresented in higher education. The next part of the application form aims to find out more about you and your background, to establish whether you meet the Office for Students guidelines.

Please tick all that apply to you:

You receive/have received free school meals  
  
You have been in the care of a local authority  
  
You are a recognised carer  
  
Either/both of your parents are/have been in the military  
  
You are a refugee  
  
You are an estranged student



**Annual household income**

What is your annual household income? Please select from the drop down list.

This is gross income (before tax and National Insurance) that your parent/carer/guardian earns in a year and includes the income of your parent's partner, if they have one.

Annual income



**Your parents' education**

Please select the highest level your parents have studied:

Parents education



For further details about each of the above categories, please read the Medicine Summer School guidance notes.

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Back

Please ensure that you read the Medicine Summer School guidance notes and the relevant policies outlined in this form. You must tick to confirm that you abide by each statement.

I have read and understood and will abide by the Health and Safety Statement and the Code of Conduct and rules in the Medicine Summer School 2020 guidance notes.  
  
Accept that an offer of a place on the Medicine Summer School is entirely at the discretion of the University of Sunderland.



**Parent/carer consent**

This section must be completed by a parent/carer if you will be under 18 at the time of attending the Medicine Summer School. Parent/carer – it is important that you read and agree to the terms outlined. The Medicine Summer School takes place Wednesday 8 July to Thursday 9 July 2020.

It is the responsibility of the University to ensure your son/daughter is supervised throughout the Medicine Summer School. The Medicine Summer School is free of charge and students will be provided with food and drinks throughout their visit.

The University of Sunderland will provide a room at Scotia Quay student accommodation for your son/daughter to stay in on the evening of Wednesday 8 July 2020. If your son/daughter are from outside the region, we may provide accommodation at the same site on the evening of Tuesday 9 July 2020. Scotia Quay is a University of Sunderland managed accommodation site.

Please tick the below boxes to confirm that:

Your son/daughter is available to attend the Medicine Summer School on Wednesday 8 and Thursday 9 July 2020.\*  
  
Your son/daughter has read and understood the information about the Medicine Summer School, as detailed in the Medicine Summer School 2020 guidance notes.\*  
  
You have read and agree to the Medicine Summer School safeguarding notice for parents and carers.\*  
  
I accept that the University of Sunderland reserves the right to make changes to the programme and terms of entry for the Medicine Summer School.\*



**Photography/filming consent**

Due to data protection legislation it is necessary for anyone wishing to use photographic images or film footage of a person/persons to obtain the appropriate consent before reproducing the images in print, online or as film footage.

**Please tick next to each statement and sign to confirm your consent:**

I hereby give my full permission that photographic images/film footage of this young person can be taken and used for any current or future University of Sunderland printed, online or film project used for marketing, PR or promotional purposes. The images will be used solely on University of Sunderland material and WILL NOT be used by or sold to any other company unless permission has been given by the subject.\*   
  
I do not give permission for any photographic images/film footage to be taken of this young person.\*



*The Data Protection Act 2018 is the UK's implementation of the General Data Protection Regulation (GDPR). The University will process the data in accordance with the principles of this act. Your information will be stored securely in a secure Medicine Summer School database and used only for the administration and provision of this information. We will not sell your data to any third party or marketing companies. The data may also be shared with the Higher Education Access Tracker (HEAT) service subscribers for the tracking of final destinations and monitoring of higher education engagement as part of the UK Government's policy to widen participation in higher education and to develop future policy. Should you choose to opt in to further communications we will also use your information to facilitate other useful marketing information based on your preferences. We will not sell your data to any third party or marketing companies. If you would like further information on how we collect and handle your data please visit* [*www.sunderland.ac.uk/privacy-and-cookies*](https://www.sunderland.ac.uk/privacy-and-cookies/) *or if you would like to unsubscribe you may contact:* [*student.helpline@sunderland.ac.uk*](https://mle.sunderland.ac.uk/tests/test-form/medicine-form/student.helpline@sunderland.ac.uk) *You also have the right to request information the University holds about you and you can do so by contacting:* [*dataprotection@sunderland.ac.uk*](https://mle.sunderland.ac.uk/tests/test-form/medicine-form/dataprotection@sunderland.ac.uk)

Keep me up to date relating to my interest in the University of Sunderland via:

Email



**Email**

Phonecalls



**Telephone**

Text messaging



**Text message/SMS**

Letters and mailings



**Post**

You may unsubscribe at any time.

The University of Sunderland is collecting this information in order for you to register for the Summer School. Your information will be stored securely and used only for the administration and provision of this request. Further information on how your data is stored and used can be found in our [Privacy notice - marketing](https://www.sunderland.ac.uk/privacy-and-cookies/privacy-notice-marketing).

**Oops! You've not opted in to receiving information relating to your interest in the University of Sunderland via:**

Email



**Email**

Phonecalls



**Telephone**

Text messaging



**Text message/SMS**

Letters and mailings



**Post**

You may unsubscribe at any time.



recaptcha