**Medicine Summer School application form**

**STEP 1: About you**

Required fields marked with\*

|  |  |  |  |
| --- | --- | --- | --- |
| First name\* **firstname (required)** |  | | Last name\* **lastname (required)** |
|  |  | |  |
| Address line 1\* **address1 (required)** | | | |
|  |  | |  |
| Address line 2 **address2 (optional)** | | Address line 3 **address3 (optional)** | |
|  |  | |  |
| County\* **county (required)** | | Postcode\* **postcode (required)** | |
|  |  | |  |
| DOB (DD/MM/YY)\* **dob (required)** |  | | Mobile\* **mobile (required)** |
|  |  | |  |
| Email\* **email (required)** | | | |
|  |  | |  |

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

**ethnic\_origin (required, select list)**

* 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
* Mixed – White and Asian
* Other Mixed background
* Arab
* Other Ethnic Background
* Prefer not to say

**STEP 2: Disabilities and Medical Conditions**

To ensure that the University can provide appropriate support whilst on campus, we ask all students 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 Medical Summer School

Do you consider yourself to have a disability?\* (please tick/highlight one or more) **disabilities (required, check boxes)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | No known disability |  |  | Mental health condition (e.g. depression, schizophrenia) |
|  |  |  |  |  |
|  | Specific learning disability  (e.g. dyslexia, dyspraxia) |  |  | Physical impairment or mobility  (e.g. wheelchair, crutches) |
|  |  |  |  |  |
|  | Deaf or serious hearing impairment |  |  | General learning disability  (e.g. down’s syndrome) |
|  |  |  |  |  |
|  | Blind or serious visual impairment |  |  | Cognitive impairment (e.g. autistic spectrum disorder, or resulting from head injury etc) |
|  |  |  |  |  |
|  | Long-standing illness or condition (e.g. cancer, HIV, diabetes, epilepsy) |  |  | Other type of disability (please provide details below) |

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.

|  |
| --- |
| **disability\_support (textarea, optional)** |

**Dietary requirements and allergies:**

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

|  |
| --- |
| **dietary\_req (textarea, optional)** |

**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\*** | **kin\_name (required)** |
| **Relationship to you\*** | **kin\_relation (required)** |
| **Telephone number\*** | **kin\_phone (required)** |

**STEP 3: Your studies**

|  |
| --- |
| Name of current school/sixth form/college\* **current\_school (required)** |
|  |
| Name of school where you obtained your GCSEs (if different) **school\_obtained\_gcse (optional)** |

**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**)

**A Levels**

Are you currently studying A Levels?

**studying\_alevel (required, select list – yes or no values)**

* Yes
* No

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:

|  |
| --- |
| **alevel\_subjects (textarea)** |

Only one subject from a combination of **maths**, **further maths** and **statistics** will be considered within the three A Levels.

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.

|  |
| --- |
| **non\_alevel\_subjects (textarea)** |

**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 **gcse1 (required)** | Grade **gcse\_grade1 (required)** |
| Subject **gcse2 (required)** | Grade **gcse\_grade2 (required)** |
| Subject **gcse3 (required)** | Grade **gcse\_grade3 (required)** |
| Subject **gcse4 (required)** | Grade **gcse\_grade4 (required)** |
| Subject **gcse5 (required)** | Grade **gcse\_grade5 (required)** |
| Subject **gcse6** | Grade **gcse\_grade6** |
| Subject **gcse7** | Grade **gcse\_grade7** |
| Subject **gcse8** | Grade **gcse\_grade8** |
| Subject **gcse9** | Grade **gcse\_grade9** |
| Subject **gcse10** | Grade **gcse\_grade10** |
| Subject **gcse11** | Grade **gcse\_grade11** |
| Subject **gcse12** | Grade **gcse\_grade12** |
| Subject **gcse13** | Grade **gcse\_grade13** |

Are you resitting any GCSEs?

**gcse\_resit (required, select list – yes or no values)**

* Yes
* No

If ‘Yes’, which subjects are you resitting? (*Please note you would have to achieve the required grades prior to applying for the course)*

|  |
| --- |
| **gcse\_resit\_subjects (textarea optional)** |

**STEP 4: Further information about you**

We are passionate about ensuring fair access for all students, regardless of background and 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:

**further\_info (checkbox, optional)**

|  |  |
| --- | --- |
|  | 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 annual\_income (select list, optional)**

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.

* Up to £25,000
* £25,001 to £42,875
* £42,876 to £60,000
* Above £60,000

**Your parents’ education**

Please select the highest level your parents have studied: **parents\_level\_studied (select list, optional)**

* GCSE or equivalent (Level 2)
* A Level or equivalent (Level 3)
* CertHE, HNC or equivalent (Level 4)
* DipHE, HND or equivalent (Level 5)
* Bachelors degree (Level 6)
* Masters degree (Level 7)
* Doctorate, e.g. PhD or DPhil (Level 8)

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

**STEP 5: Declaration**

Please ensure that you read the Medicine Summer School guidance notes and the relevant policies outlined in this document. 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 guidance notes **dec\_read\_rules (required checkbox)**
* Accept that an offer of a place on the Medicine Summer School is entirely at the discretion of the University of Sunderland  **dec\_uos\_discretion (required checkbox)**

**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 of the region, we may provide accommodation at the same site on the evening of Tuesday 7 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. **dec\_sd\_available (required checkbox)**
* Your son/daughter has read and understood the information about the Medicine Summer School, as detailed in the guidance notes **dec\_sd\_read\_guidance (required checkbox)**
* You have read and agree to the Medicine Summer School safeguarding notice for parents and carers **dec\_parent\_read\_safeguarding (required checkbox)**
* 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 **dec\_parent\_accept\_changes (required checkbox)**

**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: dec\_photograpy\_consent (required radio buttons – yes/no values)**

* 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.

|  |  |
| --- | --- |
| **~~Full name of student~~** | **~~DON’T NEED THESE BOXES AS ALREADY CAPTURED INFO ELSEWHERE~~** |
| **~~Date of birth~~** |  |
| **~~Full name of parent/carer~~** |  |
| **~~Relationship to student~~** |  |
| **~~Signed~~** |  |
| **~~Date~~** |  |

*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*](http://www.sunderland.ac.uk/privacy-and-cookies) *or if you would like to unsubscribe you may contact:* [*student.helpline@sunderland.ac.uk*](mailto: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*](mailto:dataprotection@sunderland.ac.uk)