

Application Form – State School Study Day in Medicine and Biomedical Sciences



Saturday 6th June 2020 - St John's College, Oxford

Section A: to be completed by student

First name		Surname	
Email address			Mobile number
Date of Birth			Postcode
Current School/College			Current School Postcode
GCSE School/College if different			GCSE School/College postcode

How many GCSEs (or equivalent) did you achieve at:							
9		8		7		6 or below	

Please list your A level subjects or equivalent		

Please give details of any dietary, access, or medical requirements:

Please outline briefly why you wish to attend the study day:

How do we use your information?

Student data will be stored on a database in accordance with the Data Protection Act and used to administer participation in the project. For research and monitoring purposes only, this data may also be shared with the Higher Education Funding Council for England (HEFCE), Higher Education Statistics Agency or the University and Colleges Admissions Service (UCAS) and our partners including colleges, Higher Education Access Tracker service subscribers, Connexions and the national Data Service to help evaluate the effectiveness of this activity as part of the government policy to widen participation in higher education and to develop future policy. The project and its partners will not use your record in a way that would affect you individually. We will not release data to anyone who is unauthorised.

Under the Data Protection Act 1998 you have the right to a copy of the data held about you by us, for a small fee. If you have any concerns about the use of data for these purposes or would like a copy of the data you have supplied directly to us, requests should be made in writing to access@sjc.ox.ac.uk.

Please **tick here** to give your consent for the information you have provided to be used for these purposes.

Signature of entrant:

Date:

Section B: to be completed by a teacher

Name		Position in school	
Email address		Telephone	

I certify that the details given above are accurate and that **this student is expected to achieve at least AAA at A level or equivalent**. I understand that places cannot be guaranteed and that where places are offered, these may be limited to a **maximum** of two per school.

Signed Date

Section C: to be completed by a parent or carer

I give permission for my child/dependent to attend this event if allocated places. I understand that students must make their own travel arrangements to and from Oxford unless the school organises transport.

Print name Relationship to student

Emergency contact number

Signed Date

Please return this form to Study Day, Access and Outreach Office, St John’s College, Oxford, OX1 3JP or email: access@sjc.ox.ac.uk. To be received no later than **Friday 15th May 2020**.