



DOCUMENT RETURN CHECKLIST

Please complete this checklist in full and return to the Graduate Studies Officer no later than 1 September 2024.

Surname:..... Forename(s):.....

Documents for Return:

Please tick to confirm that you have sent the following (email to graduate.admissions@univ.ox.ac.uk or post):

- | | |
|--|--------------------------|
| IT Agreement (Network Acceptable Use Policy) | <input type="checkbox"/> |
| Treasury Form | <input type="checkbox"/> |
| College/Student Contract | <input type="checkbox"/> |
| Beaumont Elms Medical Practice registration – confirmation email | <input type="checkbox"/> |

Medical Registration (Select one option):

- I confirm that I have registered with the College Doctors at 19 Beaumont Street Medical Practice.
Please attach the confirmation email from Beaumont Elms Medical Practice confirming your registration.

Or
 I have decided to register with another medical practice in Oxford. *Please provide details:*

College Regulations & Student Information (Please tick to confirm):

- I confirm that I have read carefully the *College Regulations and Information for Students*.

Signature:..... Date:.....