

# St Catherine's College

## Reply Form for Previously Matriculated Graduate-Entry Medicine Students Joining St Catherine's College

Please return in an envelope addressed to

Graduate-Entry Medicine Freshers' Mailing, St Catherine's College, Oxford, OX1 3UJ,  
United Kingdom

by Monday 6 September

Name: \_\_\_\_\_ (Please print)

Course: \_\_\_\_\_

Email: \_\_\_\_\_

### I enclose the following:

- |  |                                 |                                |
|--|---------------------------------|--------------------------------|
| 1. A completed St Catherine's College Student Contract   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 2. A completed University Card Form (with passport-sized photo with name on reverse attached)  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 3. Two additional passport photos (with name on reverse)   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4. A print out of the registration confirmation email you will receive after registering with the College Doctors at <a href="http://www.campusdoctor.co.uk/oxford/">http://www.campusdoctor.co.uk/oxford/</a> | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 5. A completed Emergency Contact Details Form  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |