



# APPLICATION FORM

Please complete all sections - this is an editable PDF

**Handwritten applications will NOT be accepted**

Please attach  
passport size  
photo here  
or scan as a  
separate page

You are applying for  
Course 28<sup>th</sup> April - 29<sup>th</sup> May, 2020

Name	First Names		Surname	
Date of Birth	Day	Month	Year	
Address current				
Address one month before course				

Contact Numbers		One month before course	
Home		Home	
Work		Work	
Mobile		Mobile	
Email		Fax	
Date of first medical qualification (eg. MB ChB)	Day	Month	Year
University			

How many times have you presented for the FRACS examination previously?

0  1  2  3

What SET specialty do you hope to apply for?

Are you preset (JDOC)?

Yes

No

**Fees if paying within New Zealand**

Course Fee	\$NZ 4,400.00
<b>Total Fee</b>	<b>\$NZ 4,400.00</b>

**Fees if paying from outside New Zealand**

Bank Fee	\$NZ 25.00*
Course Fee	\$NZ 4,400.00
<b>Total Fee</b>	<b>\$NZ 4,425.00</b>

*\*The NZ receiving bank charges a transaction fee Plus there will be bank charges from your originating bank*

Return form to: Jenny Hurley  
C/o Department of General Practice & Rural Health Dunedin School of Medicine,  
University of Otago, PO Box 56, Dunedin 9054, New Zealand or email to  
bse.course@otago.ac.nz (send to tikotiko@mail.com if you are using hotmail)

Please pay fee by bank draft or New Zealand cheque made out to  
**Dunedin Basic Medical Sciences Course**  
We cannot take credit card payments

If you are in New Zealand and want to pay via internet banking:  
Account No.: 03 0883 0164577-00. Reference details: Candidate Surname

If you are overseas, the details to pay via your bank are as follows:

03 0883 (BSB No.) 0164577-00 (Account No.)  
Bank: Westpac  
Dunedin North Branch  
58 Albany Street  
North Dunedin, 9016, NEW ZEALAND

Name: Dunedin Basic Medical Sciences Course  
Swift No: WPACNZ2W  
Reference details: Candidate Surname

**On submitting your application form, we will require supporting evidence from your RMO Co-ordinator, Surgical Supervisor or similar authority, that you have been granted leave to attend.**