



PHYSICAL
SOCIAL
EMOTIONAL
WELL-BEING

PATIENT

FAMILY

Ammie Howell
Arrente, living on Wadawurrung Country
Kila Palerttjarra
2019

Application for: **2024 Indigenous Entry Stream.** **Admission to Doctor of Medicine, Deakin University.**

NYOORA! 'hello' in Wadawurrung language, where Deakin University, Waurn Ponds is placed.

Thank you for your interest in the 2024 Indigenous Entry Stream into Doctor of Medicine at Deakin University. We're excited for you as you consider embarking on this journey!

Understanding what has led you here and how you see your future self is important to us.

Please read the following pages before you begin your application so that you are aware of important and relevant information and the stories and details that we ask you to share.

Please note: What you choose to share will inform how we can back you and your application in culturally safe ways. Your information is confidential in alignment with Deakin University Policy and only shared with our Indigenous Health and application processing teams. Deakin's Privacy Policy can be viewed at the [Deakin Policy Library](#).

WHO AND WHAT ARE WE SEEKING

Prospective students who express drive, commitment, and a capacity to develop knowledge and skills stand out. Consideration of your application is also determined by prerequisites (*see further on*).

DOCTOR OF MEDICINE COURSE REQUIREMENTS

Applicants interested in pursuing Doctor of Medicine (MD) at Deakin University require:

A Bachelor Degree or a Bachelor and Postgraduate Degree completed no more than 10 years before the course commencement date, with a final Grade Point Average weighted of 5.0 or greater.
(The Postgraduate program may also be considered towards the GPA calculation).

SUBMITTING YOUR APPLICATION

Please submit your completed application via email to the School of Medicine Admission and Placements Team at: som-selection@deakin.edu.au before **Monday 21st August 2023, 9:00am**.

*Note: Only completed applications with the supporting documents will be considered. (*See checklist on page, p.9*)

CONNECT WITH US

Feel free to reach out if you have questions or concerns. We are here and happy to assist.
Wishing you well with your application for: 2024 Indigenous Entry Stream, Admission to Doctor of Medicine.

The Indigenous Health Team.
School of Medicine, Deakin University.
Ms. Jodi Phillips
P: (03) 5227 8031
E: ihmer@deakin.edu.au

ABOUT YOU

What is your full name? First Name: Last Name:

What is your preferred name? (If different from above)

What are your preferred pronouns?

(she, her / he, him / they, them, theirs / Mrs./Ms./Miss/Mr./Other?

Are you an *Aboriginal and/or Torres Strait Islander person*?

☐

Yes, I am Aboriginal

☐

Yes, I am Torres Strait Islander

☐

Yes, I am both an Aboriginal and Torres Strait Islander Person



What Country/s, Mob/s and/or Community/ies do you have a connection with?

YOUR CONNECTION TO COMMUNITY

Please describe your connection to Community and 'your why' (in 200-400 words).

This can include involvement or roles you have had, or contributions you have made in the Community you live in or in the Communities you have lived in. (i.e.: volunteering/leadership in events, programs, services, initiatives, or Committees/Boards...etc.. (Community or professional).

Reflect on your values that motivate this and if relevant to you, emphasize an Indigenous Health perspective.

YOUR INTERESTS & ACHIEVEMENTS

We're keen to know what your interests and achievements are (personal and/or professional).

Please share what interests fill your spirit and the mentions, awards/certificates or ceremonies that have acknowledged or celebrated you and your interests... (in 200-400 words)

(i.e.: Culture, Community, caring for Country, leadership, health, science, education, workplace, advocacy, creativity, sport...)

Optional:

❖ **PLEASE ATTACH:**

- A PDF with Certificates, newspaper clippings or photos that highlight your interests and achievements.

❖ **PLEASE INSERT:**

- Links to webpages/PDFs that highlight your interests and achievements.

YOUR MOTIVATION, STRENGTHS & ASPIRATIONS FOR THE STUDY OF MEDICINE

Understanding your reasons to study Medicine, your strengths and your aspirations is valuable to you, the applicant and to our team, the readers. Please talk yourself up as you reflect on and share... (in 500-600 words).

- The moment you realized the study of Medicine was calling you... Where did this curiosity/interest come from?
- Your motivation to apply. Why the Doctor of Medicine and the Indigenous Entry Stream at Deakin University?
- What strengths and/or life experiences could you bring to your Doctor of Medicine student experience?
- Your aspirations. How do you visualize your interactions as a future Doctor and your impact in Community...?

YOUR HIGHER EDUCATION

Have you completed a Bachelor Degree? ☐ Yes ☐ No

Did you complete your Degree in the last 10 years? ☐ Yes ☐ 10+ years? Insert completion date

What was the duration of your Degree? years Did you study full-time or part-time?

or/ In what academic year do you expect to complete your studies?

What is the name of the Degree you completed or are you completing? Please include your Majors & Minors.

Please name the Institution and the Campus.

Please include additional details of your Higher/Tertiary Education. (if you require additional space please add this as an additional attachment)

Title of Certificate/Course/Degree & Name of Institution	Subjects/Units (Prioritize health/science)	Study Load (part/full-time)	Commencement & Completion Date: (mm/yyyy – mm/yyyy)	ATAR Score/ Results/GPA

Are you or have you ever been enrolled in a Medical Degree Program at an Australian University? ☐ Yes ☐ No

Have you previously been offered a place in any of the Australian Graduate-Entry Medical Programs? ☐ Yes ☐ No

Have you ever been under exclusion from any University? ☐ Yes ☐ No

If you answered "yes" to any of the questions above, please share some context...

GAMSAT

Graduate Medical School Admission Test (GAMSAT) scores are not required for our Indigenous Entry Stream application. If you have sat GAMSAT and would like your results known please complete the following:

Year of your GAMSAT Your GAMSAT Score Section I

Your GAMSAT ID# Your GAMSAT Score Section II

Your Overall GAMSAT Score Your GAMSAT Score Section III

❖ PLEASE ATTACH:

- A certified copy of the official Academic Transcript(s) for your completed Degree or results to date.
- A certified copy of the official Academic Transcript(s) from previous Institutions that list your credited subjects. (If applicable)

YOUR EMPLOYMENT, PLACEMENT and/or WORKEXPERIENCES

Please share any employment, placement and/or work experiences. This is an opportunity to elaborate on your CV or mention what is not included. If relevant to you, please emphasize your engagement within the health sector.

Position/ Role	Employer/ Organisation	Main Duties/ Responsibilities	Full-time/ Part- time/Casual	Length of Service

❖ **PLEASE ATTACH:**

➤ *An updated copy of your resumé / CV (curriculum vitae)*

YOUR CONTACT INFORMATION

Please share your contact details for the purpose of Deakin University communications.

Your Address

What is the Traditional Country you live on?

Number & Street Name:

P.O Box/Postal Address:

Suburb/Town/City:

State/Territory:

Post Code:

Contact Number: (Home)

(Mobile)

Email: *(most often used)*

Contact information of the person closest to you: (if we cannot reach you)

First and Last Name:

Address:

Contact Numbers:
(Home/Mobile)

REFEREES & SUPPORT LETTERS (COMMUNITY, ACADEMIC & WORK)

➤ **Aboriginal or Torres Strait Islander Community Referee**

Please provide the details of an Aboriginal and/or Torres Strait Islander organisation or person (who is not family), who can best speak to your Community involvement and contribution.

First & Last Name:

Role in Community:

Organisation &
Location:

Contact Numbers:

Connection to You:

➤ **Academic Referee**

Please provide a signed letter of support from a person who can best describe your academic/education journey and support your Doctor of Medicine application.

First & Last Name:

Position/Role:

Organisation &
Location:

Contact Numbers:

Email:

Connection to You:

➤ **Work Referee**

Please provide a signed letter of support from a person who can best describe your employment, placement, or work experiences and support your application for Doctor of Medicine.

First & Last Name:

Position/Role:

Organisation &
Address:

Contact Numbers:

Email:

Connection to You:

YOUR APPLICATION CHECKLIST

The following checklist will ensure that your application is complete, ready for submission and processing.

❖ HAVE YOU?

- *Reached out to your 3 Referees seeking their support for your application?*
- *Fulfilled the Doctor of Medicine requirements? (Noted at the beginning of this application)*
- *Organized the 'Have you Attached' documents below?*
- *Filled in each of the fields with the required information and re-read your application?*
- *Kept an electronic and/or hard copy of your application for your own records?*
- Submitted your application via email to the School of Medicine Admission and Placements Team at: som-selection@deakin.edu.au before **Monday 21st August 2023, 9:00am.**

❖ HAVE YOU ATTACHED?

- *The official Academic Transcript(s) of your completed Degree/s or results to date*
- *The official Academic Transcript(s) from previous Institutions that list your credited subjects (if applicable)*
- *A copy of your resumé / CV*
- *Your Academic Referee's signed Support Letter*
- *Your Work Referee's signed Support Letter*

(Sighting the original documents may be requested if your application is successful)

DECLARATION

- I declare that the information I have shared in my application and in my attachments is true and accurate.
- I give permission to the Indigenous Health Team to contact my referees in support of my application.
- I understand that if my application is successful, I may be required to provide further documents to substantiate the information in my application (*original copies and original copies of Statutory Declaration*)

☐

Rural or Remote Residency: (Please tick/check/fill the relevant boxes)

- Do you live in a rural or remote area? ☐ [‘Explore what is considered ‘rural’ and ‘remote’](#)
- Have you been a rural or remote resident for at least 5 consecutive (or cumulative) years, since the age of 5? ☐

If yes, please use the Australian Statistical Geography Standard (ASGS) [‘look-up tool’](#) to:

- Enter the area where you have lived the longest
- Determine your ASGS-RA (Remoteness Area) code (2-5 digits).

Please enter your ASGS-RA code:

(Please note that giving false or misleading information is a serious offence under the Commonwealth Criminal Code).

Please insert your electronic signature or full name

Date:

NYATNE and GOBATA! ‘thank you and take care’ in Wadawurrung language.

Nyatne, ‘thank you’ for taking the time to apply for the 2024 Indigenous Entry Stream, Admission to Doctor of Medicine at Deakin University.

The team will look forward to reading about you and your story and will be in touch with an outcome.

Gobata, ‘take care’.

The Indigenous Health Team, School of Medicine, Deakin University.