



# How To Apply

MedEdPath is the admissions representative for The University of Queensland School of Medicine Ochsner Clinical School. Following are instructions on how to apply. If you have any questions or need additional information along the way, don't hesitate to contact us at MedEdPath.

MedEdPath  
77 Water Street  
8th Floor  
New York, NY 10005  
877-777-0155  
applications@mededpath.org  
www.mededpath.org

## General Instructions

- The following documents are required for your application:
  - Application form with essay responses.
  - Official transcripts for ALL courses, including transfer credits and post-bacc courses, undertaken to date
  - MCAT scores
- The application fee is waived for Ochsner cohort applicants.
- Letters of recommendation and CVs or résumés are not required, but if you have them you may send them.
- The School of Medicine Ochsner Clinical School interviews eligible applicants.
- The medical school does not accept applications through the AMCAS system.

## Notes for Completing the Application Form

- The correct application form is titled:  
**International Student Application for Graduate Coursework Studies**  
This is the form used by international students for the MD graduate level entry application.
- You will learn that Australian English has its own colloquialisms. Among them, on the application, please note, 'tick' means 'check'.
- You may either fill out the form electronically, print and sign it, or print it first and fill it out in black ink. If you choose to hand-write the form, please write clearly, preferably in all capital letters. Retain a copy for your files.
- Complete the application form, **sign and date it**, and mail it to MedEdPath at:  
MedEdPath  
77 Water Street  
8th Floor  
New York, NY 10005  
877-777-0155
- It is recommended that you send your application using a method that allows you to track its delivery.
- The numbered notes below correspond with the numbered items on the application.

### Note 1 Personal Details

- Enter your names exactly as they appear on your passport (family = last, given = first and middle).
- Where it asks for **Order of names**, give the order in which you want your names to appear on your Offer letter and Confirmation of Enrolment. Typically, First Name followed by Last Name.
- **Date of Birth (and generally writing dates on documents in Australia)** - Enter your date of birth in **DAY - MONTH - YEAR** sequence. This is not the sequence used in the United States, where we enter the month first. Incorrectly entering your birthdate will delay your application.
- **Country of Birth.** The UQ Ochsner program is open only to U.S. citizens and permanent residents. If you were born outside of the U.S., please email us a copy of your U.S. Passport or Permanent Resident card as a separate PDF attachment, or mail a paper copy of it with your application.

### Note 2 Applicant Contact Details

- A permanent address outside Australia must be given, as well as any separate mailing address. This is required as part of the proof that you satisfy the requirements of being an international student. This cannot be a PO Box address.

### Note 3 Program of Study

- Indicate the year in which you wish to begin. The rest of this section is already filled in (the commencement is Semester 1: the MD program starts **once per year in February**; the program code is 5579; the program name is MD Ochsner).

### Note 4 Scholarship Details

- The University does not offer scholarships for the UQ Ochsner MD program. If you have confirmation that you will be receiving a scholarship from another provider, please attach official documentation from your funding organization, including duration of scholarship, expenses covered by scholarship (e.g. tuition fees, living allowance) and details of any restrictions.

#### Note 5 English Proficiency

- If English is not your first language but you have earned your Bachelor's degree in the U.S., it is not necessary to demonstrate your English proficiency through separate testing. Tick 'Yes'. Your Verbal MCAT score will suffice to demonstrate your proficiency.

#### Note 7 Academic Qualifications and Experience

- 'Course/award' signifies the degree(s) you were granted or are studying for (e.g. B.A., B.S., M.S.).
- If you have not yet received your Bachelor's degree, or are working on a higher degree such as a Master's, check 'Yes' after '*Are you currently studying?*'
- Under 'Date results expected', enter the date your degree will be granted.
- Work experience and referee reports (Résumé and Recommendations) are not required of the UQ Ochsner MD program.
- All students check 'No' after '*Do you wish to claim credit or exemptions on the basis of your previous tertiary study?*' as the medical school does not accept transfer credits.
- Check 'Yes' after '*Would you prefer an offer even if the credit assessment has not been completed?*' if you would like to receive a conditional Offer of Admission from the medical school subject to successful completion of your required degree.

#### Note 8 Overseas Student Health Cover

- International students are required to enrol in Overseas Student Health Cover (OSHC; health insurance) as a requirement of the Australian Student Visa. You may arrange for such health insurance yourself. It is, however, much easier to have UQ arrange health insurance for you through their preferred provider, Allianz Global Assistance, formerly OSHC Worldcare. If you choose to arrange it yourself, you must select one of the OSHC providers approved by the Australian Government and submit documentation of your paid enrolment for the period of your degree. This must occur before your Confirmation of Enrolment can be issued or your Student Visa be processed.
- A list of OSHC providers and information about OSHC can be found at: <http://www.health.gov.au/internet/main/Publishing.nsf/Content/Overseas+Student+Health+Cover+FAQ-1#insurersofferoshc>

#### Note 9 Permission to Release Information

- If you wish a third party, such as a relative, to have access to your application information, please fill in this section.

#### Note 10 Declaration and Signature

- Please read the declaration carefully.
- You must **hand-sign your name** on the signature line. A typed-in name or electronic signature cannot be accepted.
- The application form is not considered complete without a valid signature.

#### Additional Required Documents

In addition to the application form, MCAT scores and official transcripts are required in order to complete your application.

##### MCAT Scores

- Requirements: MCATs must have been taken during the three years previous to the start date of the program (for example, for the cohort beginning in February 2017, MCATs must have been taken from February 2014 forward.)
- To Submit MCATs: Please either mail your Score Report (Verification Code and AAMC ID number at the top), or email a PDF of your Score Report to: [applications@mededpath.org](mailto:applications@mededpath.org). You must include the Verification Code and AAMC ID.

##### Transcript(s)

- Official transcripts only (not photo-copies or student copies) must be sent directly from all institutions attended to MedEdPath. Please have transcripts for all course work leading to your degree, including summer study and course credits transferred to your degree-granting institution, sent to our office. E-transcripts must be sent to [applications@mededpath.org](mailto:applications@mededpath.org).

##### Interviews

- When all required documents have been received and deemed to have met the minimum standards for that entry year, the student will be invited for an interview, either in New Orleans at the UQ Ochsner Clinical School campus or via Skype. Detailed information about the interviews will be provided when students are invited.

# International Student Application for Graduate Coursework Studies



THE UNIVERSITY OF QUEENSLAND AUSTRALIA

CRICOS Provider Number 00025B

## Important information

- Please read the separate sheet *Notes for completing the International Student Application form – Graduate Coursework Studies* and follow the instructions. This will avoid any unnecessary processing delays.
- Your application must include a non-refundable fee of \$100 unless you are applying for a UQ scholarship.
- Please see *The Application Process* on page 106 of this prospectus for details on how to submit your application.
- Do **not** use this form if you are an Australian/New Zealand citizen; an Australian permanent resident; an applicant for Study Abroad, Exchange, or English studies; or if you wish to change your program to another program at the same level.
- Return your completed application form, documentation and application fee to UQ's International Admissions Section (see below) or to one of the University's authorised representatives ([www.uq.edu.au/edureps](http://www.uq.edu.au/edureps)).  
The Manager, International Admissions Section, The University of Queensland, Level 2, JD Story Building, Brisbane, Queensland 4072, Australia  
Web [www.uq.edu.au](http://www.uq.edu.au) Email [applicationstatus@uq.edu.au](mailto:applicationstatus@uq.edu.au)  
Phone +61 7 3365 7941 Fax +61 7 3365 1794

## 1 Personal details (see note 1)

Family name: .....  
Given names: .....  
Order of names: .....  
Date of birth: ..... DD/MM/YYYY Gender: .....  
Citizenship: ..... Country of birth: .....  
Country of current residence (country where you have been living for the past three months): .....

## 2 Applicant contact details (see note 2)

Phone: ..... Mobile: .....  
Email: .....

### Applicant's permanent address outside Australia:

Number and street: .....  
Suburb/town: .....  
State: ..... Post/zip code: .....  
Country: .....

### Applicant's mailing address (if different from above):

Number and street: .....  
Suburb/town: .....  
State: ..... Post/zip code: .....  
Country: .....

## 3 Program of study (see note 3)

Program commencement:  Semester 1 (Jan-Feb)  Semester 2 (July) Year: .....  
1st program code: ..... Program name: ..... Major: ..... Campus: .....  
2nd program code: ..... Program name: ..... Major: ..... Campus: .....

If your first program choice is not available for the semester you have indicated, what would you like to be automatically considered for?

the next available semester for your first program choice **or**  your second program choice

## 4 Scholarship details (if applicable) (see note 4)

- a) Are you applying for a UQ scholarship?  No  Yes Name of scholarship: .....
- b) Are you applying for a scholarship from another provider?  No  Yes Name of scholarship provider: .....
- c) Have you received a scholarship?  No  Yes Name of scholarship provider: .....

## UQ office use only

Student ID: .....  
Priority level: P1 / P  
Scholarship: Y / N  
Payment method: .....  
AO: .....

DATE STAMP

## Agent use only

Empl ID: .....  
Event ID: .....  
Agent ID: .....  
UQ Agent Email: .....

AGENT STAMP

**5 English proficiency (see note 5)**

- a) Is English your first language?  No  Yes (If yes, move to section 6)
- b) If your current level of English language proficiency does not meet UQ's English language entry requirements and all other entry requirements are met, would you like to receive a Package Offer which includes English Language tuition at UQ's Institute of Continuing and TESOL Education (ICTE-UQ)?  No  Yes  
If yes, please complete the ICTE-UQ application form available at [www.icte.uq.edu.au](http://www.icte.uq.edu.au) and return with this application.
- c) Please tick the appropriate box if you have completed any English test within the last two years:  TOEFL  IELTS
- d) If you sat an IELTS test, please indicate the IELTS Test Report Form (TRF) number if you can:.....
- e) If you sat an internet-based TOEFL test, please indicate your registration number and test date:  
Registration number: ..... Test date: ..... DD/MM/YY

**6 Student disability arrangements (see note 6)**

For information, please visit [www.uq.edu.au/student-services/Disability](http://www.uq.edu.au/student-services/Disability) and contact UQ's Disabilities Advisor: email [disability@uq.edu.au](mailto:disability@uq.edu.au) or phone +61 7 3365 1704.

**7 Academic qualifications and experience (see note 7)**

Please list all secondary and post-secondary programs in which you have been enrolled:

Course/award e.g., Bachelor degree, A levels	Institution e.g., Taylors College	Country e.g., Australia	Year started e.g., 2001	Year completed e.g., 2005
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Are you currently studying?  No  Yes If 'Yes', please provide details below.

Course/award	Institution	Country	Date results expected
.....	.....	.....	.....

Work experience:  Tick box if statements are attached

Referees:  Tick box if reports are attached

Do you wish to claim credit or exemptions on the basis of your previous tertiary study?  No  Yes

Would you prefer an offer even if the credit or exemption assessment has not been completed?  No  Yes

(If you tick 'No', an offer will be sent when the credit or exemption assessment has been completed.

If you tick 'Yes', you will receive an offer as soon as you are deemed eligible for program entry. Credit/exemption assessment advice will follow at a later date.)

**Important note:** Credits and exemptions will be recorded on your official academic transcript and, once granted, credits and exemptions cannot be rescinded or removed.

**8 Overseas Student Health Cover (see note 8)**

It is a condition of a student visa that you maintain Overseas Student Health Cover (OSHC) for the duration of your studies in Australia.

On your behalf, The University of Queensland can organise program-length cover with OSHC Worldcare, its preferred provider of OSHC.

Yes, I would like UQ to arrange:  Single rate OSHC for myself **or**  Family rate OSHC for myself and my dependant/s

No, I will make my own arrangements for the duration of my studies at UQ

**9 Permission to release information (see note 9)**

I authorise the following person to access details regarding my application (compulsory for students under 18 years of age):

Family name:..... Given name:..... Relationship to applicant: .....

Delegate's signature: ..... Date:.....

**10 Declaration and signature (see note 10)**

I agree:

- to The University of Queensland (the University) communicating with me via electronic means;
- to permit the University to obtain my academic results from other institutions directly or through Qualsearch;
- if any information provided by me is discovered to be untrue or misleading in any respect, I consent to the University collecting, storing and disclosing this information to Universities Australia (UA) and UA member institutions, the Australasian Conference of Tertiary Admission Centres (ACTAC) and any other relevant authority.

I understand that:

- submitted documents supporting this application become the property of the University and will not be returned to me;
- the University may vary or cancel any decision it makes if the information I have given is incorrect or incomplete;
- information is collected on this form and during my enrolment in order to meet UQ's obligations under the *ESOS Act* and the *National Code 2007*; to ensure student compliance with the conditions of their visas and their obligations under Australian immigration laws generally. The authority to collect this information is contained in the *Education Services for Overseas Students Act 2000*, the *Education Services for Overseas Students Regulations 2001* and the *National Code of Practice for Registration Authorities and Providers of Education and Training to Overseas Students 2007*. Information collected about me on this form and during my enrolment can be provided, in certain circumstances, to the Australian Government and designated authorities and, if relevant, the Tuition Assurance Scheme and the ESOS Assurance Fund Manager. In other instances information collected on this form or during my enrolment can be disclosed without my consent where authorised or required by law.

I declare that the information I have given in this application is correct and complete.

Applicant's signature: .....

Date: .....

**Signature of parent/legal custodian if student is under 18 years of age.**  
(see The Application Process section)

Parent's/legal custodian's signature: .....

Date: .....

## DEED OF ACKNOWLEDGEMENT AND CONSENT

I acknowledge that I have been advised of the following special terms of my application for enrolment into the UQ-Ochsner Program:

1. **UQ-Ochsner Program:** The arrangement for the UQ-Ochsner Program is to deliver 2 years of pre-clinical education at The University of Queensland in Australia and 2 years of clinical instruction at Ochsner Health System in Louisiana (the “**UQ-Ochsner Program**”). Students of the UQ-Ochsner cohort are required to spend the Year 1 elective in Australia and will spend additional clinical placement time in Australia during Phase 1 (Years 1 and 2), prior to transfer to the Ochsner Clinical School. Students will be required to return to Australia in Year 4 to complete one 8 week clinical rotation, and students will be responsible for all costs associated with these requirements.
2. **State and Jurisdiction Residency & Licensure:**
  - a. UQ is not responsible for assuring residency or licensure in any jurisdiction. U.S. States and jurisdictions have varying requirements for residency and for licensing after graduation from the UQ-Ochsner Program or UQ’s traditional four-year program.
  - b. I should seek the advice of the state medical board in any states in which I intend to practice to confirm the requirements of, and my eligibility for residency or licensure after graduation from the UQ-Ochsner Program or UQ’s traditional four-year program.
3. **MD Programs:** UQ has a traditional four year MD program for U.S. students other than the UQ-Ochsner Program. Information on this program may be found by emailing the University at [study@uq.edu.au](mailto:study@uq.edu.au) or on the UQ website [www.uq.edu.au/study](http://www.uq.edu.au/study)
4. **MedEdPath:** MedEdPath has been authorized to provide services to prospective students to the UQ-Ochsner Program on behalf of UQ.

Signed by: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant’s Name: \_\_\_\_\_

# Ochsner/Queensland Medical School Rotation



## Application

Complete this form if you are interested in the Ochsner/Queensland Program.

Name: .....  
First Last Middle

Date of Birth: .....  
MM DD YY

Address: .....  
Street City State Zip

E-mail Address: .....

Please answer these questions on a separate page with numbers and your name clearly stated. There is no maximum limit on words/characters for the answers.

1 Statement of purpose - describe your educational objectives

*The response to question 1 should be about one page long. If you wrote a personal statement for the AMCAS applications, you may use that statement here.*

2 Why are you interested in participating in a global education experience?

*(We suggest a minimum of a half page, single-spaced, for your answer.)*

3 How will your experience in New Orleans enhance your educational goals?

*(We suggest a minimum of a half page, single-spaced, for your answer.)*