



DOCUMENT RETURN CHECKLIST

Please complete this checklist in full and return to the Graduate Studies Officer no later than 1 September 2025.

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) ☐

Treasury Form ☐

College/Student Contract ☐
This will have been emailed to you.

Beaumont Elms Medical Practice registration –
confirmation email ☐

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:.....