

## Pathway to the MD or DMD for future applicants to the OMS specialty

### Coversheet

This pathway provides an opportunity for those who have completed a medical or dental degree to apply for the other degree (dentistry or medicine) as part of their preparation to become an Oral and Maxillofacial Surgeon (OMS).

**NOTE:** this pathway does not guarantee a place in the Royal Australasian College of Dental Surgeons OMS training program. There are separate entry requirements into such programs.

Places in this pathway are only available to domestic students who have completed the first degree (MBBS or BSc or equivalents) and are intending to proceed to an OMS specialty.

### Prerequisites

- Unrestricted registration and a Medicare Provider Number;
- Minimum GPA of 5.0 based on the last three years of full time or equivalent study in the MBBS or BSc (or equivalents)

### The selection process

Applicants who fulfil the prerequisites should complete the application form and submit a structured personal statement as outlined on the application form.

All eligible applicants will be interviewed using their personal statement as a basis for the interview.

Those applying for the DMD will also undertake a Spatial Awareness test immediately after the interview. This test is a barrier only and the results will not be used in ranking applicants.

### Final ranking

Ranking will be based on a combined score comprising:

**GPA: Interview score: Personal statement score** in the ratio **50:35:15**

### Quota

We will be offering **one** place in the OMS Pathway to an individual with a dental degree and **one** place to an individual with a medical degree.

### Other applications for medicine or dentistry

Applicants who apply to this special pathway cannot also lodge an application with GEMSAS\* (if applying for medicine) or UWA OaSys (if applying for dentistry). If you think that your chances are better through the GEMSAS/UWA OaSys application process given all the information that is currently available on the GEMSAS/UWA website, then you should apply through that pathway. If your GPA and GAMSAT score is close to the **thresholds** then you would be better to apply through the OMS pathway.

\* While applicants cannot apply for UWA medicine through GEMSAS if they have applied through this special pathway, applicants can apply to other Universities on GEMSAS. This restriction applies only to the UWA preference on GEMSAS.

## 1 SUBMITTING THIS APPLICATION FORM

### ELIGIBILITY

These places are only available to domestic students who are Australian citizens or have permanent residency.

## 2 PERSONAL DETAILS

<b>Dr/Mr/Ms/Miss/Mrs etc</b>	<b>Family Name</b>
<b>Given Names</b>	<b>Preferred Name</b>
<b>Former Family Name (if Applicable)</b>	Please attach evidence of change of name to application
<b>Date of Birth (dd/mm/yy)</b>	<b>Sex</b> M <input type="checkbox"/> F <input type="checkbox"/>
<b>Contact Address</b>	
	<b>Postcode or Country</b>
<b>Home Address (if different from Contact Address)</b>	
	<b>Postcode or Country</b>
<b>Business Phone</b>	<b>Home Phone</b>
<b>Mobile</b>	<b>Facsimile</b>
<b>Email</b>	See Electronic Communication (Section 11)
(All applicants must provide a current email address and advise of any changes to contact details)	
<b>Emergency Contact</b>	<b>Phone</b>

## 3 ENROLMENT

Have you ever been allocated a student number from The University of Western Australia?

NO

YES

If YES, state student number

Year last attended

## 4 COURSE FOR WHICH YOU ARE APPLYING

MD

DMD

## 5 PREREQUISITES

### For the MD:

1. Unrestricted registration as a dentist.
2. Medicare Provider number
3. Grade Point Average of 5.0 in the BSc or equivalent qualification

### For the DMD:

1. Unrestricted registration as a doctor.
2. Medicare Provider number
3. Grade Point Average of 5.0 in the MBBS or equivalent qualification

## 6 EDUCATIONAL HISTORY

Please supply with your application an original transcript or certified copy of your academic record for tertiary studies (this is still required for studies undertaken at UWA). The Faculty will only accept original documents or correctly certified copies. Please show all attempts made at tertiary and technical level studies.

### Tertiary or Technical

Year Commenced	Year Completed	Enter: PG = Postgraduate; BD = Bachelor's Degree; DN = Diploma/Assoc Dip (Not TAFE); DT = Diploma/Assoc Dip (TAFE); OT = Other TAFE Award	Enter: 1 = Never Commenced; 2 = Commenced but not completed; 3 = Completed	Name of Course/Award (eg BSc)	Institution, Country	Student Number
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## 7 CITIZENSHIP/RESIDENCY STATUS

Please attach to the application, original or certified copies of documentation of Citizenship/residency status.

<b>1. Are you of Aboriginal and/or Torres Strait Islander Origin?</b>		
NO <input type="checkbox"/>	YES <input type="checkbox"/> Torres Strait Islander Origin	YES <input type="checkbox"/> Aboriginal Origin
<b>2. What is your Citizenship or Residency Status?</b>		
Australian Citizen <input type="checkbox"/>	New Zealand Citizen (or diplomat or consular representative) <input type="checkbox"/>	Possess a Permanent Residency Visa (permitted to stay in Australia indefinitely) <input type="checkbox"/>
<b>3. In what country were you born?</b>		
<b>4. Year of arrival (if not born in Australia)</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>5. Do you speak a language other than English at your permanent home residence?</b>		YES <input type="checkbox"/> NO <input type="checkbox"/>
If YES, please state language(s) spoken _____		

## 8 ENGLISH LANGUAGE COMPETENCY – ENTRY REQUIREMENTS

Please indicate which of the following requirements have been successfully completed and when they were completed. *Original or certified documentation of this competency must be attached to the application.*

<b>The minimum requirement for English language competency is one of the following:</b>		
Qualification	Date Completed	
<input type="checkbox"/> Qualification through WA Certificate of Education/TEE or equivalent (pass in English, English Literature or English as a Second Language) <i>(See <a href="http://www.studyat.uwa.edu.au/undergraduate/admission/english">http://www.studyat.uwa.edu.au/undergraduate/admission/english</a> for interstate secondary schooling equivalents).</i>	□□□□ YYYY	
<input type="checkbox"/> Successful completion of the last two years of full-time or equivalent degree studies undertaken in Australia	□□/□□ MM/YY	
<input type="checkbox"/> IELTS: 7.0 (no individual band less than 7.0)	□□/□□/□□ DD/MM/YY	
<b>If your English Language qualification is not listed above, enter its details below in "Other" and supply supporting documentation. It will then be assessed by university staff to determine whether it meets minimum entry requirements</b>		
<input type="checkbox"/> Other _____ (To be assessed on an individual basis)	□□/□□/□□ DD/MM/YY	

## 9 PERSONAL STATEMENT

Please provide a personal statement which clearly addresses each of the following questions/statements. You should write no more than 1500 words in total. As well as the content, your personal statement will be assessed on the presentation and structure of your response, however there is no set format required. This personal statement will be used as the basis of a face-to-face interview.

- Q1: Explain why you would like to become an Oral and Maxillofacial Surgeon.
- Q2: Describe how your previous experiences have influenced your interest in a career in Oral and Maxillofacial Surgery.
- Q3: Detail your relevant personal qualities and characteristics. How will you put these to use as an Oral and Maxillofacial Surgeon?
- Q4: Oral and Maxillofacial Surgery is a challenging career. What challenges do you anticipate in both studying and practising Oral and Maxillofacial Surgery?
- Q5: Outline how you will deal with the demands of undertaking your required degree and the subsequent training pathway for Oral and Maxillofacial Surgery. What alternatives have you considered if unsuccessful in obtaining an OMS training post?

## 10 ELECTRONIC COMMUNICATION

When students enrol at UWA they are automatically assigned an email address. This address is then used by the University for all official electronic correspondence unless you advise that you require hard copy documents. A form to request hardcopy documents is available from Student Administration, Hackett Hall or from [www.studentadmin.uwa.edu.au/welcome/forms](http://www.studentadmin.uwa.edu.au/welcome/forms).

## 11 COMMONWEALTH ASSISTANCE (If you intend to request Commonwealth assistance, please sign below, otherwise leave blank. In addition to this signature, candidates requesting Commonwealth assistance must complete and submit a "Request for HECS-HELP Assistance" form at the time of enrolment.)

I understand that the:

- authority to collect the information on this form is contained in the Higher Education Support Act 2003;
- information is collected for program administration purposes;
- information may be shared for these purposes between the Australian Taxation Office and the Department of Education Science and Training; and
- information may not otherwise be disclosed without my consent unless authorised or required by law.

CANDIDATE'S SIGNATURE: \_\_\_\_\_

DATE: □□/□□/□□

DD/MM/YY

## 12 DECLARATIONS

### AUTHORITY TO ACCESS ACADEMIC TRANSCRIPTS

I hereby AUTHORISE The University of Western Australia to make enquiries of, and to obtain official records from, any university and tertiary educational institution concerning my current or previous attendance which, in its absolute discretion, it believes are necessary to be made or obtained and, if necessary, seek academic information or transcripts. Where necessary QualSearch will be engaged to access this academic information. I understand that The University of Western Australia is not responsible if any educational body/institution does not supply these records. I understand that the result of the search will be made available to me on request and that an audit of this authority may also be undertaken.

### GENERAL DECLARATION

I agree to obey the statutes, regulations and rules of The University of Western Australia as far as they may apply to me. I declare that the information I have submitted with this application is a true and complete record of all academic results I have achieved at each and every university and tertiary educational institution which I have attended and I acknowledge that my failure to disclose my true and complete tertiary academic record, the provision of incorrect information or the withholding of relevant information, may result in the cancellation of my enrolment at any stage, and that this action may be recorded on my student file. I will inform The University of Western Australia immediately of any change to my contact details.

I agree that I have read and understood the information provided on the application cover sheet.

CANDIDATE'S SIGNATURE: \_\_\_\_\_

DATE: □□/□□/□□

DD/MM/YY

## SUBMIT THIS FORM

**Please post your completed application and accompanying documentation to the address shown below by Friday 1<sup>st</sup> September 2017.**

### Post:

#### OMS Application

Faculty Manager, Admissions  
Faculty Admissions Office  
Faculty of Medicine, Dentistry and Health Sciences  
M501, 35 Stirling Highway  
CRAWLEY Western Australia 6009

Fax\*: +61 8 6488 4848

Email\*: [meddentadmissions@uwa.edu.au](mailto:meddentadmissions@uwa.edu.au)

\*Original or Certified transcripts are required therefore applicants who fax or email their application form must also post the hardcopy supporting documentation.

## INSTRUCTIONS

### COMPLETING THIS APPLICATION FORM

Applicants must complete all sections of this application form.

### DOCUMENTS ACCOMPANYING YOUR APPLICATION

All documents must be original copies or copies certified by a Justice of the Peace, appropriate certifying authority or an authorised UWA staff member. If documents are in a language other than English, the original document must be accompanied by an official English translation.

**Applications cannot be processed without supporting documentation. Therefore any applications with outstanding supporting documentation as at the application deadline will be deemed ineligible and will not proceed.**

### DISABILITY SUPPORT SERVICES

The University has a range of support services, equipment and facilities for students with a disability. If you would like to receive advice on these services please email [uniline@uwa.edu.au](mailto:uniline@uwa.edu.au) or visit [http://www.studentservices.uwa.edu.au/information\\_about/disability\\_programme](http://www.studentservices.uwa.edu.au/information_about/disability_programme)

### APPLICATION FORM CHECKLIST

Please ensure that you have:

- Entered your name and contact details, including your email address (if applicable).
- Advised whether you were previously enrolled at UWA and if so, given your student number and year last attended
- Entered your course preference/s, including course name
- Entered your educational history
- Completed the citizenship/residency status details
- Indicated your English language qualification
- Supplied information regarding prerequisites
- Signed the Commonwealth Assistance Declaration
- Signed the declaration
- Completed and attached the Personal Statement
- Attached all original or certified copies of supporting documentation (including academic transcripts of qualifications not obtained at UWA), information regarding prerequisites, proof of citizenship/residency status and English language competence, evidence of name change (if applicable).

### FURTHER INFORMATION ON COURSES AND STUDY AT UWA

Further information on student services at UWA together with comprehensive information relating to enrolment, examinations, fees and charges and other relevant policies and procedures can be found at <http://www.studentadmin.uwa.edu.au> and <http://www.studyat.uwa.edu.au/postgraduate>.