

## Medical School Applicant Workshop Invitation

You have been invited to an upcoming event on **Saturday 23rd March 2019** for Year 12 (lower sixth) sixth formers who wish to study Medicine at university. If you are a teacher, please pass this invite on to your students. Teachers **do not** need to confirm students' interest via e-mail, students just need to apply via the link below to register their interest.

The event is being run by current Medical Student volunteers for the project **Manchester Outreach Medics**, a branch of University of Manchester Students' Union. Similar events have been run by the same team in Rochdale, Preston and Manchester last academic year, which have received very positive feedback. A timetable for the day has been attached to the e-mail sent to sixth form teachers. You will be given one of these on arrival.

Attendees should arrive for registration between **10:30am to 11:15am**.

The event is being held at **Bolton Sixth Form College**. The event is **free** to attend.

The event will give attendees the opportunity to take part in various activities that will give you the skills to apply to Medical School:

- ☐ PBL
- ☐ Communicating with simulated patients
- ☐ Practical skills
- ☐ Lectures on life at medical school and applying to medical school
- ☐ Q&A with Medical Students
- ☐ Health Politics and Ethics

A limited number of places are available. To register their interest, we the only thing sixth formers need to do is complete the survey below by **16<sup>th</sup> March 2019**:

<https://umsu.onlinesurveys.ac.uk/moms-event-23rd-march-2019>

Those who have been allocated a place will be contacted 7 days before the event to confirm. If a sixth former is not contacted, they will not have received a place. We apologise for this but we have a limited capacity due to funding and safeguarding limitations. We honestly would take everyone if we could!

**On the day** we require you to bring a **completed parental consent form** and **photograph consent form**. This has been attached to the invite e-mail.

Please contact us if you have any questions.

Kind Regards,  
Ammena Zahabi, Lucy Smith & Daisie Edgerley  
Manchester Medical Students  
Manchester Outreach Medics Event Organisers

| Attendee Timetable |  |  |  |
|--------------------|--|--|--|
| Time               | Groups 1-4   | Groups 5-8                                   | Groups 9-12                                  |
| 10:30 – 11:15      | <b>Registration, Practical Skills and Q&amp;A Stalls</b><br><i>Attendees register, fill in a pre-event questionnaire, and go to the lecture hall. In the lecture hall, they can take part in practical skills and Q&amp;A with medical students.</i> |  |  |
| 11:15 – 11:45      | <b>Welcome Presentations</b><br><i>The leading member of the team welcomes everybody and explains the itinerary for the day. Following this, a half an hour presentation on ‘Applying to Medicine’ and ‘Life at Medical School’.</i>                 |  |  |
| 11:45 – 12:15      | <b>Mock PBL case</b><br><i>Attendees are split up into small groups ran by medical students. Medical students explain what PBL is and attendees then take part in their own PBL session.</i>   |  |  |
| 12:15 – 12:45      | <b>Introduction to Communication Skill</b><br><i>Staying in small groups, medical students teach attendees basic communication skills for interviewing patients, and facilitating practise.</i>  |  |  |
| 12:45 – 13:15      | <b>Top Tips For Applying</b><br><i>A whistle-stop tour of tactically applying to your strengths to maximise your chances of getting an offer</i>   |  |  |
| 13:15 – 14:00      | <b>Lunch</b>   |  |  |
| 14:15 – 15:00      | <b>Simulated Primary Care Centre</b>   | <b>UKCAT/BMAT</b>                            | <b>Personal Statement and Medical Ethics</b> |
| 15:00 – 15:45      | <b>Personal Statement and Medical Ethics</b>   | <b>Simulated Primary Care Centre</b>         | <b>UKCAT/BMAT</b>                            |
| 15:45 – 16:30      | <b>UKCAT/BMAT</b>  | <b>Personal Statement and Medical Ethics</b> | <b>Simulated Primary Care Centre</b>         |
| 16:35 – 16:45      | <b>Wrap-up</b><br><i>Post-event questionnaires filled in by attendees.</i>   |  |  |

**PARENTAL CONSENT FORM 23<sup>rd</sup> MARCH 2019 MOMS EVENT**

Member's Surname \_\_\_\_\_

Forename(s) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postcode \_\_\_\_\_

Date of Birth \_\_\_\_\_

Telephone Number \_\_\_\_\_

Name of Parent/ Legal Guardian \_\_\_\_\_

Contact Number(s) \_\_\_\_\_

Name of Doctor \_\_\_\_\_

Address of Doctor \_\_\_\_\_

Doctor's Telephone Number \_\_\_\_\_

*I understand that The Students' Union are not responsible for my child during whilst they are not on site at the event (this includes travel to and from the event) or during the 1 hour lunch break when students will have the option to leave the site for lunch.*

**Agree/ Disagree – please circle.**

*I understand that the Students' Union are not responsible for the food that is brought into the building for lunches.*

**Agree/ Disagree – please circle.**

Please answer the following questions with yes or no. If the answer is yes, please give details. Your reply will be treated in confidence.

Does the member have any special dietary needs? YES / NO

If Yes – please provide details below

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Does the member have any allergies? (e.g. Nuts, penicillin, plasters) YES / NO

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Does the member have any medical conditions or on any medication? YES / NO

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Does the member suffer from any sensory impairments (e.g. hearing/ sight) YES / NO

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Do you agree to the use of plasters on minor cuts / grazes? YES / NO

How will the member be planning to travel home following the event, and whom will they be travelling with?

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|   |  | Please tick<br>Yes or No |                       |
|---|--|--------------------------|-----------------------|
|   |  | Yes                      | No                    |
| I consent to the information I have provided about the candidate being used by The University of Manchester for research and monitoring purposes.   |  | <input type="radio"/>    | <input type="radio"/> |
| I consent to the information I have provided about the candidate being passed on to sister societies within the University of Manchester, such as Making Medicine Accessible and Medreach |  | <input type="radio"/>    | <input type="radio"/> |
| I am happy to be contacted by The University of Manchester about future activities and events.  |  | <input type="radio"/>    | <input type="radio"/> |
| Signed _____ Date _____   |  |                          |                       |

SIGNED \_\_\_\_\_

DATE \_\_\_\_\_

RELATIONSHIP TO MEMBER \_\_\_\_\_