| Student name | | |
|---|--|--------------------------|
| Date of birth | | |
| Email address | | |
| Form | | Please tick if enclosed |
| FOITH | | riease tick ii elicioseu |
| Financial declaration (only if not already returned) | | |
| Undergraduate licence to occupy | | |
| University card form | | |
| Somerville College undergraduate student contract | | |
| Data protection form | | |
| Music form | | |
| Friends of Somerville form | | |
| GP registration and new patient questionnaire (please place both forms in a separate envelope) | | |
| Please complete and return the forms in one large envelope including a copy of this checklist. Please place all medical forms in a separate envelope, which should be labelled with your name and date of birth. This should then be included in the large envelope with the other forms. For security reasons, your bank account details should be sent completely separately from the other registration documents. Please tick here to confirm that this form has been sent in a separate envelope. | | |
| If you are a non-UK student, please do not provide your bank account details at this stage. You will have an opportunity to open a UK bank account during freshers' week. | | |
| The envelope should be Academic Office (Regist Somerville College Woodstock Road Oxford OX2 6HD United Kingdom | | |

- Please ensure that the envelope reaches the College by Friday 1st September 2017.
- If you have any queries, please email <u>academic.office@some.ox.ac.uk</u>.