

**Registration form  
(centres within the UK)**

**4 November 2015**

*This form is to be completed by the candidate and to be returned to the BMAT co-ordinator at your open centre.*



**BioMedical Admissions Test**

**BMAT EXAMINATION APPLICATION FORM**

**1. CENTRE DETAILS**

<b>Centre Details: Duff Miller College</b>	
<b>Address: 59 Queen's Gate London SW7 5JP</b>	<b>Telephone: 0207 225 0577</b>
<b>Email: registrar@duffmiller.com</b>	
<b>Contact Name: Rachel McDonagh</b>	

**2. CANDIDATE DETAILS**

<b>Family Name:</b>		<b>Given Name(s):</b>	
<b>Sex:</b>	<b>Male:</b>	<b>Female:</b>	<b>Date of Birth:</b>
<b>Candidate's Address:</b>		<b>Telephone:</b>	
		<b>Mobile:</b>	
<b>Email:</b>			

University applied to	Tick	Course Code	College Code	College Name
Brighton & Sussex Medical School (B74)	<input type="checkbox"/>	A100 Medicine		
Cambridge (C05)	<input type="checkbox"/>	A100 Medicine	Required:	Required:
	<input type="checkbox"/>	D100 Veterinary Medicine		
Imperial (I50)	<input type="checkbox"/>	A100 Medicine	N/A	N/A
	<input type="checkbox"/>	A109 Graduate Medicine 5yr		
	<input type="checkbox"/>	B900 Biomedical Science 3yr		
	<input type="checkbox"/>	B9N2 Biomedical Science with Management 4 yr		
University of Leeds	<input type="checkbox"/>	A100 Medicine		
	<input type="checkbox"/>	A200 Dentistry		
Oxford (O33)	<input type="checkbox"/>	A100 Medicine	Required:	Required:
	<input type="checkbox"/>	A101 Graduate Medicine		
	<input type="checkbox"/>	BC98 Biomedical Sciences		
RVC (R84)	<input type="checkbox"/>	D100 Veterinary Medicine	N/A	N/A
	<input type="checkbox"/>	D101 Combined Degree Programme		
University College London CL (U80)	<input type="checkbox"/>	A100 Medicine	N/A	N/A
Lee Kong Chian School of Medicine	<input type="checkbox"/>	Medicine		

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**3. PAYMENT DETAILS**

<b>Cost of exam: £275 (non-refundable)</b>
<b>Payment can be made in cash or cheques which are made payable to Duff Miller College</b>
<b>Deadline for Duff Miller to receive the enrolment form and payment is 30 September 2015</b>

**4. CANDIDATE'S SIGNATURE**

Signature _____
Date _____

**\* Please attach one passport size photograph and a photocopy of a form of I.D, ideally your passport**