

# BMAT

BIOMEDICAL ADMISSIONS TEST

## BMAT registration form



Admissions  
Testing Service

*Measuring Potential*

This form is designed as an aid for centres making entries via the Admissions Testing Service Entries Extranet. It will NOT be accepted as an entry by the Admissions Testing Service.

Entries must be made by centres between of 1 September and 15 October 2017. Late fees will apply after 9:00 Bangkok Time on 1 October. No entries will be accepted after 12:00 afternoon Bangkok Time on 15 October 2017.

This registration form should NOT be returned to the Admissions Testing Service but should be handed to your test centre.

All entries must be made by registered centres via the Admissions Testing Service Entries Extranet.

Centre Examinations Officers wishing to make changes to an entry should NOT make a new entry but should view/edit the entry which has already been made. Please be aware that making a new entry may result in additional late entry fees or cause a delay in the reporting of results.

### CENTRE DETAILS

Centre name:	THAMMASAT UNIVERSITY, CICM	Centre number:	T	H	6	7	0
Address:	Chulabhorn International College of Medicine, Thammasat University, Rangsit centre, Klong Luang, Pathumthani , Thailand 12121	Telephone number: (including country code)	+66 (0)6 1820 4630				
		Fax number: (including country code)	-				
Contact name:	DR.P.KITIPAWONG	Email address:	intermed@tu.ac.th				

### CANDIDATE DETAILS

Please give your entry details exactly as per your UCAS application and/or your passport or national ID document.

Family name:							First name(s):								
Gender:	Male			Female			Date of birth: (dd/mm/yyyy)		/		/				
UCAS ID:				-											
Candidate's address:							Candidate's email:								
							Telephone number:								



Please select the institution(s) and the course(s) you are applying for from the following list:

Universities applied to	Course code					Course
Brighton and Sussex Medical School (B74) *	<input type="checkbox"/>	A	1	0	0	Medicine
Chulalongkorn University	<input type="checkbox"/>	M	D	C	U	Doctor of Medicine
Imperial College London (I50)	<input type="checkbox"/>	A	1	0	0	Medicine
	<input type="checkbox"/>	A	1	0	9	Graduate Medicine (5-year course)
Keele University (K12) †	<input type="checkbox"/>	A	1	0	0	Medicine
	<input type="checkbox"/>	A	1	0	4	Health Foundation Year
Lancaster University (L14)	<input type="checkbox"/>	A	1	0	0	Medicine
Lee Kong Chian School of Medicine	<input type="checkbox"/>	M	B	B	S	Medicine
Mahidol University	<input type="checkbox"/>	M	A	H	I	Medicine
Thammasat University: CICM and Dentistry #	<input type="checkbox"/>	2	9	0	1	Doctor of Medicine (English language)
	<input type="checkbox"/>	2	9	0	2	Doctor of Dental Surgery (bilingual English/Thai)
University College London (U80)	<input type="checkbox"/>	A	1	0	0	Medicine
University of Cambridge (C05) ‡	<input type="checkbox"/>	A	1	0	0	Medicine
	<input type="checkbox"/>	D	1	0	0	Veterinary Medicine
University of Leeds (L23)	<input type="checkbox"/>	A	1	0	0	Medicine
	<input type="checkbox"/>	A	2	0	0	Dentistry
University of Oxford (O33) ‡	<input type="checkbox"/>	A	1	0	0	Medicine
	<input type="checkbox"/>	A	1	0	1	Graduate Medicine
	<input type="checkbox"/>	B	C	9	8	Biomedical Sciences
Universidad de Navarra	<input type="checkbox"/>	U	N	A	V	Medicine
Other .....	<input type="checkbox"/>					.....

\* International applicants (those who are not ordinarily resident in the UK or EU) to Brighton and Sussex Medical School are not required to sit BMAT.

† Applies only to 'overseas for fees' applicants to Keele University.

# Candidates applying to Thammasat University should check the [University's website](#) as there may be nationality or other restrictions on applicants.

‡ University of Cambridge and University of Oxford College names and codes are not required when registering for BMAT.

# BMAT

ACCESS ARRANGEMENTS



Requests for modified papers must be received by **30 September 2017**.

## PAYMENT DETAILS\*

Not applicable		Supervised rest breaks	
Maximum of 25% extra time		Unmodified A3 question paper and answer sheet	
Other (please give details of requested facilities or other modifications)			
Reason for Access Arrangement request (evidence, statement from school/doctor etc.)			
Admissions Testing Service fee for candidates taking the test <u>at Thammasat centre(TH670) and apply to Thammasat CICM &amp; Dentistry or more other University</u>	<input type="checkbox"/>	6,500.00(THB)	
Late Entry fee for entries made from 09.00 Bangkok Time on 1 October until 12.00 afternoon BST on 15 October 2017	<input type="checkbox"/>	2,000.00(THB)	
<b>TOTAL FEE PAYABLE</b>		<b>(THB)</b>	
Make cheques payable to	CHULABHORN INTERNATIONAL COLLEGE OF MEDICINE		
Send form with payment or electronic proof of payment by <u>1 October 2017</u> to	bmatcicm@gmail.com		

\* The entry fee will increase from 09.00 Bangkok Time on 1 October until 12.00 afternoon Bangkok Time on 15 October 2017 due to it being a late entry.



### CANDIDATE'S SIGNATURE

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#### DATA PROTECTION NOTICE / CONSENT

By registering for BMAT, you agree that data provided as part of the entry or admission process may be passed to any institution involved in your university application and to UKMED Development Group and that the data may be used for research purposes. You also agree that if you obtain a place on a course where BMAT results form part of the admissions process, then your University may supply the Admissions Testing Service with data about your application and results in subsequent assessments at that University, unless you specifically notify the University in writing. We store personal data securely and will ensure if candidate data is used in publications or research that it is used anonymously.

#### CENTRE'S TERMS \*

##### Declaration by Candidate

1. I make this entry according to the provisions of the published regulations which I have studied.
2. I have given all the information required truthfully and accurately to the best of my knowledge and belief.
3. I agree that there should be no refund of all fees should I decide to withdraw from the examination.
4. I understand that it is my responsibility to check the examination schedule to ensure that I will be able to enter the examination, and I agree that no arrangements can be made for rescheduling.
5. I understand that on the examination day I must present Thai national ID card or passport as proof of identity, and I agree that if I do not do this I will not be allowed to take the examination.

##### Disclaimer:

Thammasat University, CICM and Dentistry take all responsible steps to continuity of service. We feel sure you will understand, however, that we cannot be held responsible for any interruptions caused by circumstances beyond our control. If examinations or their results are disrupted, cancelled or delayed, every effort will be made to resume normal service as soon as possible. Thammasat University's liability will be limited to the refund of the registration fee or re-testing a later date.

I have read and fully understood all information in the Registration guide and Notice to Candidates and will follow all the instructions stated.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

PLEASE RETURN THIS FORM TO [bmatcicm@gmail.com](mailto:bmatcicm@gmail.com)



**CAMBRIDGE ENGLISH**

Language Assessment

Part of the University of Cambridge