

## Department of General Practice

School of Primary Health Care

# Application for admission 2010

---

1759 Graduate Diploma in Family Medicine

2677 Master of Family Medicine (Clinical)

0099 Master of Family Medicine

2678 Graduate Certificate in Medical Acupuncture

Short Certificate Courses (non award)

---

## Information sheet

Please read the information and instruction sheet carefully before completing the application form.

IMPORTANT – **Faxed** applications and documents are **not** acceptable.

### Notes

- Documents should be legally certified copies, original documents are not normally returned. N.B If supporting documentation is not available at the time of mailing; please enclose an explanatory note indicating an anticipated supply date.
  - Applications **MUST** be forwarded to the address provided on the Information Sheet.
  - Fee payment is only required for Short Certificate course applications – prices and a payment slip is located towards the rear of this application. For further information about fee payment for award courses refer below.
- 

## Payment of Fees (award courses only)

Within two weeks of enrolling an email will be sent to your Monash student email account informing you that your fees have been assessed and your 'Enrolment Details and Fee Statement' will be available to view and print online. The invoice will outline your course and unit enrolment details and the applicable fees and payment date. Payment options are available at:

<http://www.monash.edu.au/fees/payment/methods.html>. *Please do not complete the enclosed payment slip.*

### Please submit your application to:

Graduate Studies Office  
Department of General Practice  
School of Primary Health Care  
Monash University  
Building 1, 270 Ferntree Gully Road  
Notting Hill  
Victoria 3168  
AUSTRALIA

For help or advice about your application please contact:

**Telephone:** +61 3 8575 2216

**Email:** [julianne.mcluckie@med.monash.edu.au](mailto:julianne.mcluckie@med.monash.edu.au)

**Website:** [www.med.monash.edu.au/general-practice/teaching/pgrad.html](http://www.med.monash.edu.au/general-practice/teaching/pgrad.html)



# MONASH University

## DIRECT APPLICATION FORM – GRADUATE/POSTGRADUATE COURSES

For *on-* and *off-campus* local/domestic students and *off-campus* international students only

### Instructions and information for using this form

If you are applying for a number of courses that are managed by different faculties, you must submit a separate application form and supporting documentation to each faculty, including all of your course preferences on each copy. For information on courses, entry requirements and which faculty manages your course(s) of interest, refer to the

Monash CourseFinder

[www.monash.edu.au/study/coursefinder/](http://www.monash.edu.au/study/coursefinder/)

### THIS FORM IS FOR:

- Australian citizens
- New Zealand citizens
- Permanent residents of Australia
- Permanent humanitarian visa holders
- International students applying for an **off-campus** course

**International students**, including permanent residents of New Zealand, applying for on-campus courses must apply through Monash International Recruitment Services. Please see: [www.monash.edu/international/apply/](http://www.monash.edu/international/apply/)

### THIS FORM IS TO BE USED TO APPLY FOR:

On-campus and off-campus Coursework graduate/postgraduate courses such as Postgraduate Diploma, Graduate Certificates, Graduate Diplomas\* or Masters by Coursework.

### Submitting your application form and closing dates

The following website has information on the closing dates and return addresses for each course application. It also includes information on additional course application requirements. Please locate your course of interest and follow the corresponding instructions at [www.adm.monash.edu.au/admissions/pgdirectappform.html](http://www.adm.monash.edu.au/admissions/pgdirectappform.html) or see the additional information sheet

- Please print boldly in blue or black ink using block letters
- Please attach one set of supporting documentation (all documents must be certified copies – see below).

**Please take careful note of your course's specific application requirements and be sure to attach all relevant documentation.** Please visit the website of the faculty that manages your degrees if interest or contact the faculty directly.

### Off-Campus Learning applications

A list of courses available via off-campus learning can be found at [www.monash.edu.au/offcampus/courses.html](http://www.monash.edu.au/offcampus/courses.html)

### Off-campus application requirements:

1. You must state your proposed study program for ALL courses, including the teaching period (ie, semester one, semester two, or full-year unit). It may be necessary to discuss your study program with a course adviser, particularly if applying for credit. Contact the relevant faculty office as listed in the Off-Campus Learning website [www.monash.edu.au/offcampus](http://www.monash.edu.au/offcampus).

### Fee information

Higher education providers may offer students either a 'Commonwealth-supported place' or a 'fee-paying place'. The majority of graduate courses only offer fee-paying places. For more information on tuition fees and loan schemes available, please see: [www.monash.edu.au/study/fees/](http://www.monash.edu.au/study/fees/)

### Certification of documents

All applicants to Monash University courses must provide certified copies of any previous results or qualifications from institutions other than Monash University or Monash College and any other supporting documentation in relation to your application. Examples of such documents include:

- Birth/marriage certificates etc. required as evidence of name change
- Academic qualifications from other institutions including testamurs/academic transcripts/result certificates
- Copy of Australian Permanent Resident Visa or Australian Certificate of Citizenship

Any documentation not properly certified will be returned and your application will not be assessed. Faxed copies will not be accepted. Original documents will not be returned.

The following people are acceptable signatories for certification of documents: A justice of the peace or bail justice; a notary public; a barrister and solicitor of the supreme court; a clerk to a barrister and solicitor of the supreme court; a member of the police force; the sheriff or a deputy sheriff; a registered medical practitioner; a registered dentist; a veterinary practitioner; a pharmacist; a principal in the Victorian government teaching service; the branch manager of a bank; a member of the institute of chartered accountants in Australia or the Australian society of accountants or the national institute of accountants; a minister of religion (not a civil celebrant); a fellow of the institute of legal executives (Victoria)

### Overseas qualifications and documentation

Please provide information on the grading structure of the institutions you have attended. Results in a language other than

English must be translated. For translations contact the Department of Immigration and Citizenship, Level 24, 2 Lonsdale Street, GPO Box 241E, Melbourne 3000. Telephone: 1300-654-151. Monash University reserves the right to refuse documentation on the grounds of incorrect certification or translation procedures.

### General Information

- This is an application form only and does not constitute enrolment for any course in the University or entitle an applicant to be classified as a student of the University.
- This application is the property of Monash University. Supporting documentation will NOT be returned.
- It is the applicant's responsibility to advise Monash University regarding any change of address.
- Applicants must provide correct and complete information (including information on all previous studies). If it is found that an applicant has provided incorrect information or withheld relevant information relating to their application, an offer for a place in a course may be withdrawn and/or the enrolment may be cancelled.
- Faxed applications and documents are NOT acceptable. If supporting documentation is not available at the time of mailing, enclose an explanatory note indicating an anticipated supply date.

### Privacy Statement

The information on this form is collected for the primary purpose of assessing your application. Other purposes of collection include the creation of a record on the student database, attending to administrative matters, corresponding with you and statistical analyses. If you choose not to complete all the questions on this form, it may not be possible for the University to assess your application. Personal information may also be disclosed to the education institutions or your employer(s) to make an informed decision about the application or matters that concern your enrolment at Monash. You have a right to access personal information that Monash University holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the University Privacy Officer on 9905 6011.



Have you been excluded from Monash or other tertiary institutions for academic reasons? Yes  No

If YES, please provide details of the course(s), year and reasons for exclusion:

Are you a Monash staff member? Yes  No

If YES, please state your staff number:

#### 4. Residency details

Are you a citizen or permanent resident of Australia?

Yes — If yes, please attach a certified copy of your birth certificate or the photo page of your passport.

No — please state your country of citizenship \_\_\_\_\_.

#### 5. Tertiary education

You must provide a legally certified copy of your undergraduate medical degree (unless the previous study was at Monash, in which case you do not need to provide a transcript). Please use additional pages if space provided is insufficient or provide Curriculum Vitae.

Name of institution	Country	Details of program, studies awards	Year first enrolled	Year last enrolled	Tick if completed

#### 6. Outstanding results

Are you currently awaiting results of any post-secondary or tertiary studies? Yes  No

If yes, name of qualification and institution:

Date on which results will be available:

#### 7. Research interests

Applicants applying for the Master of Family Medicine are required to attach a research proposal for the minor thesis or research component of their course (300-500 words). If a research proposal is required, please attach it on a separate sheet of paper. Details of courses requiring research proposals can be found at [www.adm.monash.edu.au/admissions/pgdirect-app-instruct.html](http://www.adm.monash.edu.au/admissions/pgdirect-app-instruct.html)

#### 8. Off-campus study program

A list of available units is attached. For course structure and unit outlines, refer to Monash University handbooks at [www.monash.edu.au/pubs/handbooks](http://www.monash.edu.au/pubs/handbooks) (updated each October). Alternatively please contact the Department of General Practice for further advice ([julieanne.mcluckie@med.monash.edu.au](mailto:julieanne.mcluckie@med.monash.edu.au))

If you are unsure of how to complete this section, or are applying for credit transfer, leave this blank. A suggested study program will be sent to you with your Confirmation of Acceptance letter.

Unit code	Unit title	Teaching period	Unit approved (office use only)
		Semester 1 <input type="checkbox"/> Semester 2 <input type="checkbox"/>	
		Semester 1 <input type="checkbox"/> Semester 2 <input type="checkbox"/>	
		Semester 1 <input type="checkbox"/> Semester 2 <input type="checkbox"/>	
		Semester 1 <input type="checkbox"/> Semester 2 <input type="checkbox"/>	
		Semester 1 <input type="checkbox"/> Semester 2 <input type="checkbox"/>	
		Semester 1 <input type="checkbox"/> Semester 2 <input type="checkbox"/>	
		Semester 1 <input type="checkbox"/> Semester 2 <input type="checkbox"/>	
		Semester 1 <input type="checkbox"/> Semester 2 <input type="checkbox"/>	

**Recommended study load is 12 credit points per semester**

## 9. Statistical Information

Number of Years in General Practice	Year of Medical Graduation
-------------------------------------	----------------------------

Type of Practice <input type="checkbox"/> Solo <input type="checkbox"/> Group	Location of Practice <input type="checkbox"/> Urban <input type="checkbox"/> Rural	Fraction <input type="checkbox"/> Full time <input type="checkbox"/> Part time
--	---	---

Country of Residence During Study Period <input type="checkbox"/> Australia <input type="checkbox"/> Other _____	Year of Arrival in Australia (If applicable)	Country of Birth <input type="checkbox"/> Australia <input type="checkbox"/> Other _____
---	---	---

Do you have a disability, impairment or long term medical condition which may affect your study? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please specify <input type="checkbox"/> hearing <input type="checkbox"/> learning <input type="checkbox"/> mobility <input type="checkbox"/> vision <input type="checkbox"/> medical
--	---

Reasons for undertaking the course <input type="checkbox"/> Self development <input type="checkbox"/> upgrade knowledge and skills <input type="checkbox"/> QA&CPD purposes <input type="checkbox"/> alter practice <input type="checkbox"/> pursue an academic/ Teaching role <input type="checkbox"/> Improve patient management <input type="checkbox"/> Other _____
---

## 10. English Language Proficiency

State in which way you fulfill the University's English minimum language proficiency requirements by ticking the appropriate statement below. Certified copies of results must be provided in all cases.

- I have achieved a satisfactory level of performance in an English subject at Year 12 or equivalent level where the language of instruction for the whole curriculum was in English.
- Satisfactorily completing a sufficient period of study, at a sufficiently advanced level, in an English-medium institution, ie; an undergraduate degree within five years prior to commencement of the course of intended enrolment.
- I have undertaken an IELTS (International English Language Testing System – academic) test within the past 24 months and have achieved a minimum overall test score of 6.5 (with reading 6.5, listening 6.5, writing 6.0 and speaking 6.0).
- I have undertaken a TOEFL (American Test of English as a Foreign Language) test within 24 months and have achieved a paper-based test score of 580 with a Test of Written English (TWE) score of at least 4.5 and an internet-based test score of 90 with at least 22 in writing and no section lower than 20.
- All of my secondary schooling was in English and I have successfully completed at least two English-rich university level subjects in an institution where English is the language of instruction and assessment.
- I have successfully completed the Monash University English Language Bridging Program, or equivalent programs, at the appropriate level.

Please note that some courses have higher requirements – please check course information on faculty websites [www.monash.edu.au/faculties](http://www.monash.edu.au/faculties)

I am applying for a degree in the Faculty of Education and have provided certified copies of results which fulfil the Faculty's requirements stated in [www.education.monash.edu.au/students/prospective/english-requirements/](http://www.education.monash.edu.au/students/prospective/english-requirements/)

## 11. Declaration

I warrant that the information on this form, or provided in support of my application, is correct and complete. I acknowledge that the provision of incorrect information or the withholding of relevant information relating to my application, including academic transcript/s, might invalidate my application and that the University may withdraw an offer of a place or cancel my enrolment in consequence. Should the University determine that I have submitted a false document, I consent to the University disclosing this information to other relevant tertiary institutions.

I consent to any educational institution at which I have previously been a student and/or my current or any past employer, providing Monash University with information which that institution or employer holds about me for the purpose of Monash verifying my grades and/or qualifications or experience.

I authorise Monash University to obtain further information with respect to my application and, if necessary, seek academic information or transcripts from Australian educational institutions. Where necessary *Qualsearch* will be engaged to access this academic information. I understand that Monash University is not responsible if any educational body or institution does not supply these records. I understand that the results of the search will be made available to me on request and that an audit of this authority may also be undertaken.

I have read the University's statement on privacy and the purposes for which my personal information will be used (available at <http://www.privacy.monash.edu.au/guidelines/collection-personal-information.html>).

I agree to abide by the statutes, regulations and policies of Monash University.

**Applicant's Signature:**

**Date** / /

**Checklist**

- Completed and signed application
- Evidence of Australian citizenship or Australian permanent residency
- Certified copies of official academic transcripts (undergraduate medical degree)
- Evidence of English language proficiency (if not established by secondary/tertiary transcripts).

- A curriculum vitae (where appropriate)
- An application for credit if relevant
- You have the correct mailing address for your form as advised on  
Off campus: [www.monash.edu.au/offcampus](http://www.monash.edu.au/offcampus)  
On campus: [www.adm.monash.edu.au/admissions/ugdirect-app-instruct.html](http://www.adm.monash.edu.au/admissions/ugdirect-app-instruct.html)

**OFFICE USE ONLY** **Approved for Admission**  
**Basis for Admission:**

- Completed MBBS or equivalent (AUS/OS)
- Has obtained 2 years or more postgraduate experience

English language entry requirements met by:  
-----  
----- **Not approved for admission**AUTHORISED BY: \_\_\_\_\_  
(Director, Graduate Studies or alternate)

DATE: \_\_\_\_\_

**Application keyed** Yes  No 

Date: \_\_/\_\_/\_\_\_\_

**Letter sent** Yes  No 

Date: \_\_/\_\_/\_\_\_\_

**Credit assessed:** Yes  No 

Date: \_\_/\_\_/\_\_\_\_

**Comments:****Additional Comments or administrative steps:**

Department of General Practice

# List of Offerings 2010

Graduate Diploma in Family Medicine  
Master of Family Medicine (Clinical) / Master of Family Medicine  
Short Certificate courses (*elective units only*)

Semester 1	Semester 2
<b>12 Credit point units - Core</b>	<b>12 Credit point units - Core</b>
<a href="#">MFM2000</a> Principles of general practice <sup>1</sup> <a href="#">MFM2008</a> Applied research in general practice <sup>2</sup> <a href="#">MFM2007</a> Learning and Teaching <sup>1</sup>	<a href="#">MFM2000</a> Principles of general practice <a href="#">MFM2006</a> Introduction to research methods <sup>1</sup> <a href="#">MFM2008</a> Applied research in general practice <sup>2</sup>
<b>12 Credit point units - Elective</b>	<b>12 Credit point units - Elective</b>
<a href="#">MCM9204</a> Dermatology <sup>1</sup> <a href="#">MCM9207</a> Child health <a href="#">MCM9212</a> Community geriatrics <a href="#">MCM9301</a> Women's sexual and reproductive health in general practice	<a href="#">MCM9204</a> Dermatology <sup>1</sup> <a href="#">MCM9207</a> Child health <a href="#">MCM9212</a> Community geriatrics <a href="#">MCM9301</a> Women's sexual and reproductive health in general practice
<b>6 Credit point units - Elective</b>	<b>6 Credit point units - Elective</b>
<a href="#">MCM9019</a> Ophthalmology <a href="#">MCM9201</a> Depression and anxiety disorders in general practice <a href="#">MCM9208</a> Practice management <a href="#">MCM9302</a> Stress management <a href="#">MCM9303</a> Pain management <a href="#">MCM9304</a> Palliative care <a href="#">MCM9305</a> Preventive care in clinical practice <a href="#">MCM9306</a> Issues in general practice prescribing <a href="#">MCM9307</a> Diabetes <a href="#">MCM9308</a> Men's sexual and reproductive health <a href="#">MCM9310</a> Cardiovascular health	<a href="#">MCM9014</a> Musculoskeletal medicine <a href="#">MCM9017</a> Medical ethics <a href="#">MCM9201</a> Depression and anxiety disorders in general practice <a href="#">MCM9202</a> Clinical nutrition <a href="#">MCM9302</a> Stress management <a href="#">MCM9303</a> Pain management <a href="#">MCM9304</a> Palliative care <a href="#">MCM9305</a> Preventive care in clinical practice <a href="#">MCM9306</a> Issues in general practice prescribing <a href="#">MCM9307</a> Diabetes <a href="#">MCM9308</a> Men's sexual and reproductive health <a href="#">MCM9310</a> Cardiovascular health

<sup>1</sup> Video Conference Workshop (subject to student numbers) to be held in during semester of study. *Compulsory attendance required when workshop scheduled.*

<sup>2</sup> Master of Family Medicine Students only

Recommended study load is 12 credit points per semester

## 2010 Semester Dates

**Semester 1, 2010: 01 March to 2 July 2009**

**Semester 2, 2010: 19 July to 19 November 2009**

Department of General Practice

# List of Offerings 2010

---

## Graduate Certificate in Medical Acupuncture

### Semester 1

#### 12 Credit point units - Core

CMA1001 History & Philosophy, Channels and Points  
CMA1002 Modern Physiology and Assessment of Pain

### Semester 2

#### 12 Credit point units - Core

CMA1003 Acupuncture Techniques and Therapeutics  
CMA1004 Clinical Practice

- Please note one weekend workshop will be conducted each semester. Dates and times to be advised.

### 2010 Semester Dates

**Semester 1, 2010: 01 March to 2 July 2009**

**Semester 2, 2010: 19 July to 19 November 2009**

Department of General Practice

School of Primary Health Care

## Payment for Short Certificate Course 2010

Course fees are payable in full upon application to the course.

2009	Australian Citizen	International
12 credit point	AUD\$3,800	AUD\$4,999
6 credit point	AUD\$1,900	AUD\$2,499

*Course materials may not be despatched until payment has been processed.*

Please use BLOCK CAPITALS

Title	Family name	Given names

I, the above, hereby authorise payment of AUD\$     .

for my course fees in the following Short Certificate Course for 2010: \_\_\_\_\_

### Payment Method (please indicate your payment option)

I have enclosed a cheque/bank draft (AUD\$) made payable to **'Monash University'** or;

Please debit my:  Visa  Mastercard  Amex

Card No.

Expiry Date   /

Name on Card \_\_\_\_\_

Signature: \_\_\_\_\_

Date (day/month/year): \_\_\_\_/\_\_\_\_/\_\_\_\_

**Privacy statement** The information on this form is collected for the purposes of payment for Short Certificate Course fees under the Monash University Collection, Storage and Destruction of Credit Card Details Policy. If you do not complete all questions on this form it may not be possible for the payment to be processed. If you wish to inquire about the handling of this information, please contact the University Privacy Officer at the following email address: [privacyofficer@adm.monash.edu.au](mailto:privacyofficer@adm.monash.edu.au)

## Department of General Practice

School of Primary Health Care

# Application for advanced standing 2010

---

## Information (*award courses only*)

Please read this information and instruction sheet carefully before completing the application form.

- Copies of Awards should be legally certified copies (refer below). Please do NOT send these original documents as they are not normally returned. If supporting documentation is not available at the time of mailing, enclose an explanatory note indicating an anticipated supply date. Faxed applications and documents are NOT acceptable.
- In addition to the legally certified copy of your award you must include an ORIGINAL (not copied) letter from the awarding institution confirming your enrolment with them.
- Advanced standing is approved only for the course you have listed. If you enter a new course, you will need to apply for advanced standing again.
- When applying for advanced standing an original or certified copy of your academic results must accompany this application. In addition, a copy of the unit syllabus (units synopsis, assessment, number of hours, textbooks used) in the year the subject was studied will be required.
- Advanced standing is not automatic. You must not consider that advanced standing has been granted until you have received written notification from the department.
- You may only apply for advanced standing within *twelve* months of your initial application for admission (i.e. the first two semesters of study including any leave of intermission approved during this period)
- Applications for advanced standing must be lodged before the Census Date of payment of fees for the units concerned.
- Up to a maximum of 50% of the value of the course may be credited for work completed either:
  - within a previous enrolment in the course,
  - at an external institution, or
  - at Monash University as a non-award course

## Examples of advanced standing that may be granted include:

- **Specified credit from individual units** The student is exempted from having to study that unit within the current course.
- **Block credit from the course or advanced standing** The student is granted credit for a 'block' period and is able to enter the course at an advanced level based on previous study (e.g. 48 credit points may be granted for successful completion of Graduate Diploma in Family Medicine).
- **Unspecified credit from elective units** The student is granted credit for a unit that does not match any of the core units within the course.
- **Exemption without credit or substitution** The student is exempted from having to study a particular unit (based on prior study), but is required to study another unit in its place.

## How to have your documents certified

Take the originals and copies to the person who is to certify them.

Please refer to the following website of persons authorised to certify photocopied documents. The certifier should be asked to ensure that their name, title (or other indication of their authority to certify documents) and date.

<http://www.adm.monash.edu.au/scholarships/applicants/who-can-certify.html>

Contact details for further help or advice with your application

Graduate Studies Office  
Building 1, 270 Ferntree Gully Road  
NOTTING HILL  
Victoria 3168  
AUSTRALIA

Telephone: +61 3 8575 2216

Email: [julianne.mcluckie@med.monash.edu.au](mailto:julianne.mcluckie@med.monash.edu.au)

Website: <http://www.med.monash.edu.au/general-practice/teaching/pgrad.html>

# Department of General Practice

School of Primary Health Care

## Application for advanced standing 2010

### 1. Course

Specify current course code

1759 Graduate Diploma in Family Medicine

2677 Master of Family Medicine (Clinical)

0099 Master of Family Medicine

### 2. Personal details

Student ID number (if known)

Title	Family name	Given names

Date of birth (day/month/year)

### 3. Previous Study (Please use BLOCK CAPITALS)

Office use only

Course Title		Approved with Credit	<input type="checkbox"/> Specified
		Approved with Credit	<input type="checkbox"/> Unspecified
Awarding Institution		Credit Points Granted	
		<input type="checkbox"/> Not Approved	
Date Course Commenced		Signature	
Date Course Completed		Date	

Course Title		Approved with Credit	<input type="checkbox"/> Specified
		Approved with Credit	<input type="checkbox"/> Unspecified
Awarding Institution		Credit Points Granted	
		<input type="checkbox"/> Not Approved	
Date Course Commenced		Signature	
Date Course Completed		Date	

Course Title		Approved with Credit	<input type="checkbox"/> Specified
		Approved with Credit	<input type="checkbox"/> Unspecified
Awarding Institution		Credit Points Granted	
		<input type="checkbox"/> Not Approved	
Date Course Commenced		Signature	
Date Course Completed		Date	

### 4. Declaration

Declaration

I declare that I acknowledge Monash University reserves the right to seek from other relevant bodies, verification of the standing of my claimed qualifications in order to make an informed decision about the application. I acknowledge that I have read and agree to the terms and conditions as outlined in the Department of General Practice, School of Primary Health Care's Privacy policy and that I am bound by the statutes and regulations of the Department and University.

Signature: \_\_\_\_\_

Date (day/month/year): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Privacy statement** The information on this form is collected for the purposes of assessing your application for advanced standing. If you do not complete all questions on this form it may not be possible for the application to be assessed by your enrolled faculty. Personal information may also be disclosed to the relevant institutions for verification of your previous studies. You have a right to access personal information that Monash University holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the University Privacy Officer at the following email address: [privacyofficer@adm.monash.edu.au](mailto:privacyofficer@adm.monash.edu.au)