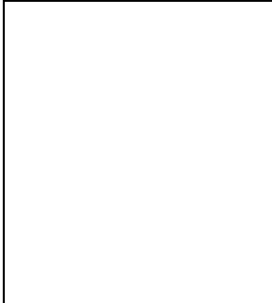


**Statement from the Dean of student's home Medical School**

**Please attach a recent photograph.**

**Your Medical School Seal/stamp must be placed over the photograph and onto this application form.**

**As Dean of (insert name of Medical School) \_\_\_\_\_**

**I certify that:**

- **The above photograph is a true likeness of:**
- **Full name of student** \_\_\_\_\_
- **Date of birth** \_\_\_\_\_
- **The above named student is in good standing** \_\_\_\_\_
- **Medical School is listed on the World Health Organisation Directory** \_\_\_\_\_

**Year of Study:** \_\_\_\_\_

**Date expected to graduate:** \_\_\_\_\_

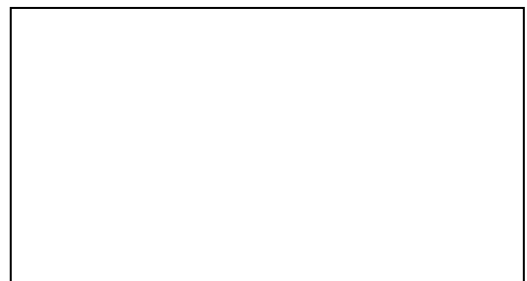
**Signature:** \_\_\_\_\_

**Name: (please print)** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Seal/Stamp of Establishment**



**PLEASE RETURN THIS FORM AND ACCOMPANYING DOCUMENTS TO:**

**[Medical.electives@newcastle.ac.uk](mailto:Medical.electives@newcastle.ac.uk)**