



PHYSICAL
SOCIAL
EMOTIONAL
WELL-BEING

PATIENT

FAMILY

For office use only	

Ammie Howell
Arrente, living on Wadawurrung Country
Kila Palertjarra
2019

**Application for: 2025 Indigenous Entry Stream.
Admission to Bachelor of Vision Science/Master of Optometry,
Deakin University.
(For non-year 12 applicants).**

NYOORA! 'hello' in Wadawurrung language, where Deakin University, Waurn Ponds is placed.

Thank you for your interest in the 2024 Indigenous Entry Stream into Bachelor of Vision Science/Master of Optometry (BVSMO) at Deakin University. We're excited for you as you consider embarking on this journey!

Understanding what has led you here and how you see your future self is important to us.

Please read the following pages before you begin your application so that you are aware of important and relevant information and the stories and details that we ask you to share.

Please note: What you choose to share will inform how we can back you and your application in culturally safe ways. Your information is confidential in alignment with Deakin University Policy and only shared with our Indigenous Health and application processing teams. Deakin's Privacy Policy can be viewed at the [Deakin Policy Library](#).

COURSE INFORMATION

The Bachelor of Vision Science/Master of Optometry nurtures students' knowledge and skills in the biological and physical bases of vision in the practice of Optometry and in understanding eye health issues and their impacts in regional, rural and urban communities.

The course is an accelerated program that draws on Deakin University's trimester system, enabling students to fast-track entry into the profession in 3.5 years.

The course comprises 40 credit points over a full-time program and delivered over 10 sequential trimesters.

Please see our [Bachelor of Vision Science/Master of Optometry webpage](#) for more information.

WHO AND WHAT WE ARE SEEKING

Aboriginal and/or Torres Strait Islander people hoping to return to study or begin their university journey, who are not year 12 graduates.

Applicants who express drive, commitment and a capacity to develop knowledge and skills stand out. Consideration of your application is also determined by prerequisites (*see further on*).

"Optometric education is a continuum from entry into optometry training, to lifelong continuing education after completion of formal training and registering to practice".

Please click on: [BVSMO Inherent Requirements](#) to read and understand the inherent requirements in full.

BACHELOR OF VISION SCIENCE/MASTER OF OPTOMETRY ENTRY REQUIREMENTS

Applicants interested in pursuing a Bachelor of Vision Science/Master of Optometry at Deakin University require:

- A Senior Secondary Certificate of Education with an ATAR of at least 50 (or equivalent), including:
 - Units 3 and 4
 - A study score of at least 30 in English as an Additional Language or at least 25 in English (other than EAL)

OR

- At least one successfully completed year of Certificate IV/Diploma/Bachelor qualification in any discipline

OR

- Sitting and successfully completing a STAT MC (Special Tertiary Admissions Test, Multiple Choice) if yet to complete any of the above in the last 10 years. (Provided by Deakin University's Faculty of Health)

ESSENTIALS

Working with Children Check

Successful applicants will require a valid [Working with Children Check](#) (WWCC) prior to undertaking professional placements during the course.

Police Record Check

Successful applicants will require a valid [National Police Record Check](#) prior to undertaking professional placements as part of this course.

Immunisations

Successful applications will also require current immunisation status prior to commencing clinical placement.

The Indigenous Health Team will reach out to successful applicants to provide guidance upon enrolment and transition. For more information see ['Requirements for undertaking placements'](#).

SUBMITTING YOUR APPLICATION

Please submit your completed application via email to the School of Medicine Admission and Placements Team at: som-selection@deakin.edu.au before **5pm Monday September 30th 2024**

**Note: Only completed applications with the required supporting documents will be considered. (See 'CHECKLIST' section on pages 9 & 10)*

CONNECT WITH US

Feel free to reach out if you have questions or concerns. We are here and happy to assist.

Wishing you well with your application for:

2024 Indigenous Entry Stream,
Admission to Bachelor of Vision Science/Master of Optometry. Deakin University.

School of Medicine, Deakin University.

P: (03) 52273001

E: som-selection@deakin.edu.au

The Indigenous Health Team.

E: ihmer@deakin.edu.au

ABOUT YOU

What is your full name? First Name: Last Name:

What is your preferred name? (If different from above)

What are your preferred pronouns? D.O.B
(she, her / he, him / they, them, theirs / Mrs./Ms./Miss/Mr./Other?)

Are you an *Aboriginal and/or Torres Strait Islander person*?

Yes, I am Aboriginal  Yes, I am Torres Strait Islander  Yes, I am both an Aboriginal and Torres Strait Islander Person  

What Country/s, Mob/s and/or Community/ies do you have a connection with?

YOUR CONNECTION TO COMMUNITY

Please describe your connection to Community and 'your why' (in 200-400 words).

This can include involvement or roles you have had, or contributions you have made in the Community you live in or in the Communities you have lived in. (i.e.: *volunteering/leadership in events, programs, services, initiatives or Committees/Boards..etc.. Community or professional*).

Reflect on your values that motivate this and if relevant to you, emphasize an Indigenous Health perspective.

YOUR INTERESTS & ACHIEVEMENTS

We're keen to know what your interests and achievements are (personal and/or professional).

Please share what interests fill your spirit and the mentions, awards/certificates or ceremonies that have acknowledged or celebrated you and your interests... *(in 200-400 words)*

(i.e.: Culture, Community, caring for Country, leadership, health, science, education, workplace, advocacy, creativity, sport...)

Optional:

❖ **PLEASE ATTACH:**

- A PDF with Certificates, newspaper clippings or photos that highlight your interests and achievements.

❖ **PLEASE INSERT:**

- Links to webpages/PDFs that highlight your interests and achievements.

YOUR MOTIVATION, STRENGTHS & ASPIRATIONS FOR THE STUDY OF VISION SCIENCE/OPTOMETRY

Understanding your reasons to study BVSMO, your strengths and your aspirations is valuable to you, the applicant and to our team, the readers. Please talk yourself up as you reflect on and share... (in 500-600 words).

- The moment you realized the study of Vision Science/Optomety called you... Where did this interest come from?
- Your motivation to apply. Why BVSMO and the Indigenous Entry Stream at Deakin University?
- What strengths and/or life experiences could you bring to your BVSMO student experience?
- Your aspirations. How do you visualize your interactions as a future practitioner and your impact in Community...?

YOUR EDUCATION

Have you successfully completed (within the last 10 years):

- A Senior Secondary Certificate of Education with an ATAR of at least 50 (or equivalent)? Yes
- A Certificate IV or higher qualification in a science-related discipline or at least the 1st year? Yes
- A Diploma in any discipline? Yes
- A Bachelor Degree in any discipline? Yes
- OR would you be willing to sit and complete a STAT MC?* Yes

Please include details of your Secondary and/or Tertiary/Higher Education.

Title of Certificate/Course/Degree & Name of School/Institution	Subjects/Units (Prioritize health/science)	Study Load (part/full-time)	Commencement & Completion Date: (mm/yyyy – mm/yyyy)	ATAR Score/ Results/GPA

- Are you/have you ever been enrolled in a Vision Science/Optometry Program at an Australian University? Yes No
- Have you previously been offered a place in any of the Vision Science/Optometry Degree Programs? Yes No
- Have you ever been under exclusion from any University? Yes No

If you answered "yes" to any of the questions above, please share some context...

❖ **PLEASE ATTACH:**

- *A certified copy of the official Academic Transcript(s) for your completed Qualifications or results to date.*
- *A certified copy of the official Academic Transcript(s) from previous Institutions that list your credited subjects. (If applicable)*

YOUR EMPLOYMENT, PLACEMENT and/or WORKEXPERIENCES

Please share any employment, placement and/or work experiences. This is an opportunity to elaborate on your CV or mention what is not included. If relevant to you, please emphasize your engagement within the health sector.

Position/ Role	Employer/ Organisation	Main Duties/ Responsibilities	Full-time/ Part-time/Casual	Length of Service

❖ **PLEASE ATTACH:**

- *An updated copy of your resumé / CV (curriculum vitae)*

COMMUNICATION AND PROBLEM-SOLVING SKILLS

Reflect on a time when you experienced a problem with a co-worker, friend, or peer...

Please share (*in 200 - 400 words*).

- How you went about resolving the problem with this person (communication skills)
- What measures you would take to prevent the same situation from reoccurring (problem solving skills)

LEARNING A NEW SKILL IN A CHALLENGING ENVIRONMENT

Reflect on a moment you have learned and achieved a new skill.

Please share (*in 200 - 400 words*).

- How you went about learning and achieving your new skill
- The obstacles that presented and how you overcame these obstacles in your learning

YOUR CONTACT INFORMATION

Please share your contact details for the purpose of Deakin University communications.

Your Address

What is the Traditional Country you live on?

Number & Street Name:

P.O Box/Postal Address:

Suburb/Town/City:

State/Territory:

Post Code:

Contact Number: (Home)

(Mobile)

Email: *(most often used)*

Contact information of the person closest to you: (if we cannot reach you)

First and Last Name:

Address:

Contact Numbers:
(Home/Mobile)

REFEREES & SUPPORT LETTERS (COMMUNITY, ACADEMIC & WORK)

➤ Aboriginal or Torres Strait Islander Community Referee

Please provide the details of an Aboriginal and/or Torres Strait Islander organisation or person (who is not family), who can best speak to your Community involvement and contribution.

First & Last Name:

Role in Community:

Organisation &
Location:

Contact Numbers:

Connection to You:

➤ **Academic Referee**

Please provide a signed letter of support from a person who can best describe your academic/education journey to support your application.

First & Last Name:

Position/Role:

Organisation & Location:

Contact Numbers: Email:

Connection to You:

➤ **Work Referee**

Please provide a signed letter of support from a person who can best describe your employment, placement or work experiences to support your application.

First & Last Name:

Position/Role:

Organisation & Address:

Contact Numbers: Email:

Connection to You:

YOUR APPLICATION CHECKLIST

The following checklist will ensure that your application is complete, ready for submission and processing.

❖ **HAVE YOU?**

- Reached out to your 3 Referees seeking their support for your application?
- Fulfilled the Bachelor of Vision Science/Master of Optometry requirements? (Noted at the beginning of this application)
- Organized the 'Have you Attached' documents below?
- Filled in each of the fields with the required information and re-read your application?
- Kept an electronic and/or hard copy of your application for your own records?
- Submitted your application via email to the School of Medicine Admission and Placements Team at: som-selection@deakin.edu.au before **5pm Monday 30th September 2024**

❖ **HAVE YOU ATTACHED?**

- The official Academic Transcript(s) of your completed qualifications or results to date (if applicable)
- The official Academic Transcript(s) from previous Institutions that list your credited subjects (if applicable)
- A copy of your resumé / CV
- Your Academic Referee's signed Support Letter
- Your Work Referee's signed Support Letter

(Sighting the original documents may be requested if your application is successful)

DECLARATION

- I declare that the information I have shared in my application and in my attachments is true and accurate.
- I give permission to the Indigenous Health Team to contact my referees in support of my application.
- I understand that if my application is successful, I may be required to provide further documents to substantiate the information in my application (*original copies and original copies of statutory declaration*)

Rural or Remote Residency: (Please tick/check/fill the relevant boxes)

- Do you live in a rural or remote area? ['Explore what is considered 'rural' and 'remote'](#)
- Have you been a rural or remote resident for at least 5 consecutive (or cumulative) years, since the age of 5?

If yes, please use the Australian Statistical Geography Standard (ASGS) ['look-up tool'](#) to:

- Enter the area where you have lived the longest
- Determine your ASGS-RA (Remoteness Area) code (2-5 digits)
- Please enter your ASGS-RA code:

(Please note that giving false or misleading information is a serious offence under the Commonwealth Criminal Code).

Please insert your electronic signature or full name

Date:

NYATNE and GOBATA! *'thank you and take care' in Wadawurrung language.*

Nyatne, *'thank you'* for taking the time to apply for the:
2024 Indigenous Entry Stream,
Admission to: The Bachelor of Vision Science/Master of Optometry, Deakin University.

The team will look forward to reading about you and your story and will be in touch with an outcome.

Gobata, *'take care'*.
The Indigenous Health Team,
School of Medicine, Deakin University.