



Medicine & Health Sciences

Application for Admission Early Selection Program for Contractual Schools

1. Full Legal Name: _____

2. Sex: Male Female Other

3. Parent or Guardian Name(s): _____ Occupation: _____ Education (Highest Level): _____
Father _____
Mother _____

4. Permanent Address: _____
(Street Address) (City) (State) (Zip Code)
Local Address: _____
(Street Address) (City) (State) (Zip Code)
Permanent Phone: _____ Cell Phone: _____
University e-mail: _____ Preferred e-mail: _____

5. Secondary school attended: _____
City, State: _____ Graduation year: 20____

6. List all colleges/universities that you have attended.

7. Have you ever registered at any institution under a different name?
Yes No If yes, name: _____

8. Place of Birth (City, State, Country): _____
Citizenship: U.S. Citizen Canadian Citizen U.S. Permanent Resident
*If you are a Canadian citizen you will be required to complete a financial document if accepted to the program.

9. (Optional) How would you describe yourself? Please check all that apply.
 Black, Non-Hispanic White, Non-Hispanic American Indian or Alaskan Native, or Native Hawaiian
 Hispanic Asian or Pacific Islander
 Socioeconomically Disadvantaged 1st Generation College Student
 Other _____

10. Please indicate your SAT or ACT scores. If scores are not listed on your official high school transcript, official SAT scores must be verified by your premedical advisor.
**Note: SAT and/or ACT scores are required.*
SAT: Math: _____ Reading: _____ Writing: _____ Total: _____
ACT: _____

11. Were you ever the recipient of any institutional action by any college or medical school for unacceptable academic performance or conduct violation, even though such action may not have interrupted your enrollment or required you to withdraw? **You must answer “Yes” even if the action does not appear on or has been deleted or expunged from your official transcripts due to institutional policy or personal petition.**

***In the event that the answer to this question changes or requires an update, you must submit information to medsp@gwu.edu immediately.*

Yes No

If yes, please attach an explanation.

12. Have you ever been convicted of, plead guilty, or plead *nolo contendere* (i.e. no contest, I do not wish to contend) to an offense? Have you ever been arrested for a felony or misdemeanor?

***In the event that the answer to this question changes or requires an update, you must submit information to medsp@gwu.edu immediately.*

Yes No

If yes, please explain. Please restrict your answer to three lines.

13. You must have completed one year of chemistry and one year of biology or physics by the end of this spring semester. Please indicate course number, credit hours, and grade (“IP” if in progress):

Note: AP and IB courses will be reviewed on a case-by-case basis.

	Course Number	Credit Hours	Grade
Chemistry (6 credits lecture & 2 credits lab)			
Biology (6 credits lecture & 2 credits lab)			
Physics (6 credits lecture & 2 credits lab)			
Organic Chemistry (6 credits lecture & 2 credits lab)			
English (6 credits)			
Biochemistry (3 credits)			
Math/Statistics/Research			
Social/Behavioral Science			

14. a. What are you currently intending to major/minor in?

Major: _____ Minor: _____

b. If you are admitted to the Early Selection Program, what will you major/minor in?

**Please note you must major or minor in a non-science area.*

Major: _____ Minor: _____

c. Please attach a projected course work schedule for your junior and senior years that would result from acceptance into the Early Selection Program. Please limit your projected schedule to one page and include current spring courses in progress.

Note: All science coursework must be completed prior to your last semester at your institution.

15. Indicate post-high school salaried work experience:

16. Indicate any clubs, organizations, and leadership roles post-high school:

17. Indicate significant post-high school service, clinical, health related, or related activities. Include dates.

18. What is your most meaningful clinical (patient-related) experience?

Please answer all items below on a separate sheet of paper attached to this application.

Limit your response to a MAXIMUM of 3 sheets of paper (12 pt. font 1-inch margins) total using only one side per sheet.

19. Please describe your specific interest in the Early Selection Program. How will you change/enhance your next two undergraduate years if accepted into the Early Selection Program? What will you do that is different?

20. Why do you believe that medicine is really the vocation for you? It is important that you reference experiences and/or mentors that have influenced you.

21. What is your specific interest in the GWU M.D. program? What opportunities will you take advantage of while an M.D. student at GW? Why?

PLEASE SUBMIT TO YOUR PREMEDICAL ADVISOR BY THE DATE REQUESTED:

****Note: This material will be forwarded to GW by your premedical advisor.**

- **Signed, completed application**
- **Current resume**
- **A letter of reference from your premed advisor**
- **Two additional letters of recommendation**
 - **At least one letter should be from a science professor**
- **Official college transcripts and high school transcripts**
- **Projected coursework list for junior/senior years, including current spring courses**
- **Official ACT and/or SAT scores (if not listed on your high school transcript)**
- **Photograph (required if offered an interview)**

Applications due to GW by March 25

Office of Admissions
2300 I Street, NW
Ross Hall Suite 106
Washington, DC 20037
(202) 994-3506
medsp@gwu.edu

UNSIGNED OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

Decisions made by the Committee on Admissions are confidential and final. Please note your file will NOT be reviewed if you do not meet the overall minimum 3.5 GPA or have C's in science/math coursework.

I HEREBY CERTIFY THAT I PERSONALLY FILLED OUT THIS APPLICATION AND THAT THE INFORMATION IS TRUE, ACCURATE, AND COMPLETE, SO AS NOT TO BE MISLEADING. I AGREE TO PROPERLY ADVISE OF CHANGES IN THE INFORMATION PROVIDED.

Applicant's Signature

Date

The submission of materially false or misleading information on an application form or in connection with the application process shall be grounds for rejection. If such a submission is discovered after entrance into the medical school or award of a degree, it shall be grounds for dismissal or for revocation of the degree.

Mission & Vision

The George Washington University School of Medicine and Health Sciences is dedicated to improving the health of our local, national, and global communities by:

- Educating a diverse workforce of tomorrow's leaders in medicine, science, and health sciences.
- Healing through innovative and compassionate care.
- Advancing biomedical, translational and health services delivery research with an emphasis on multidisciplinary collaboration.
- Promoting a culture of excellence through inclusion, service, and advocacy.

As a globally recognized academic medical center, GW embraces the challenge of eliminating health disparities and transforming health care to enrich and improve the lives of those we serve.

The university is an Equal Employment Opportunity/Affirmative Action (EEO/AA) employer committed to maintaining a non-discriminatory, diverse work environment. The university does not unlawfully discriminate on the basis of race, color, religion, sex, national origin, age, disability, veteran status, sexual orientation, gender identity or expression, genetic information, or on any other basis prohibited by applicable law in any of its programs or activities.

Inquiries concerning this policy and federal and local laws and regulations concerning discrimination in education and employment programs and activities may be directed to the university's Office of Equal Employment Opportunity and Affirmative Action: 2033 K Street, NW, Suite 320 Washington, DC 20052 (202) 994-9656. Inquiries may also be directed to the U.S. Department of Education Office for Civil Rights, the U.S. Equal Employment Opportunity Commission, or the applicable state or local agency (for example, the District of Columbia Office of Human Rights).

Questions regarding protections against discrimination on the basis of sex may be directed to the university's Title IX Coordinator, the Vice Provost for Diversity and Inclusion: 813 Rice Hall 2121 Eye Street, NW Washington, DC 20052 (202) 994-7440.

Questions regarding the protections against discrimination on the basis of disability may be directed to the university's Disability Services Coordinators. Students may contact the Associate Dean of Students, Administrative Services, Office of the Dean of Students: 401 Rice Hall 2121 Eye Street, NW Washington, DC 20052 (202) 994-6710, and other members of the university community may contact the Executive Director of Equal Employment Opportunity and Affirmative Action: K Street, NW, Suite 320 Washington, DC 20052 (202) 994-9633.

To request disability accommodations, students should contact the Office of Disability Support Services: (202) 994-8250 dss@gwu.edu. Employees and other members of the university community should contact the Office of Equal Employment Opportunity and Affirmative Action: (202) 994-9656 eeo@gwu.edu