



# Medicine & Health Sciences

## Application for Admission Early Selection Program for Contractual Schools

1. Full Legal Name: \_\_\_\_\_
2. GWID: \_\_\_\_\_
3. Gender Identity \_\_\_\_\_ Pronouns: \_\_\_\_\_
4. Parent or Guardian Name(s): \_\_\_\_\_ Occupation: \_\_\_\_\_ Education (Highest Level): \_\_\_\_\_  
 Parent #1 \_\_\_\_\_  
 Parent #2 \_\_\_\_\_
5. 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: \_\_\_\_\_
6. Secondary school attended: \_\_\_\_\_  
 City, State: \_\_\_\_\_ Graduation year: 20\_\_\_\_\_
7. List all non-GW colleges/universities that you have attended. (Transcripts must be sent directly to this office immediately.)  
 \_\_\_\_\_

8. Have you ever registered at any institution under a different name?  
 Yes  No  If yes, name: \_\_\_\_\_

9. I am currently registered as full-time Student?  Yes  No

10. 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.

11. Please indicate your SAT or ACT scores. If scores are not listed on your official high school transcript, official SAT/ACT scores must be sent electronically directly from College Board to GWSMHS to [medsp@gwu.edu](mailto:medsp@gwu.edu)

\*Note: SAT and/or ACT scores are required.

SAT: \_\_\_\_\_ Math: \_\_\_\_\_ Reading: \_\_\_\_\_ Writing: \_\_\_\_\_ Total \_\_\_\_\_ ACT: \_\_\_\_\_

Current GPA: \_\_\_\_\_

12. 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](mailto:medsp@gwu.edu) immediately.*

Yes  No  **If yes, please attach an explanation.** \_\_\_\_\_

13. 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](mailto:medsp@gwu.edu) immediately.*

Yes  No

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

---



---



---

14. You must have completed one year of chemistry and one year of biology or physics by the end of the 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
<b>Chemistry</b> (6 credits lecture & 2 credits lab)			
<b>Biology</b> (6 credits lecture & 2 credits lab)			
<b>Physics</b> (6 credits lecture & 2 credits lab)			
<b>Organic Chemistry</b> (6 credits lecture & 2 credits lab)			
<b>English</b> (6 credits)			
<b>Biochemistry</b> (3 credits)			
<b>Math/Statistics/Research</b>			
<b>Social/Behavioral Science</b>			

15. 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.*

16. Indicate post-high school paid work experience:

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? Use only the space provided for your answer. Do not attach any additional pages
  
  
  
  
  
  
  
  
  
  
19. Why do you believe medicine is the right vocation for you? Use only the space provided for your answer. Do not attach any additional pages
  
  
  
  
  
  
  
  
  
  
20. What is your specific interest in the GW MD program? Use only the space provided for your answer. Do not attach any additional pages
  
  
  
  
  
  
  
  
  
  
21. Why Early Selection? What will you do differently? Use only the space provided for your answer. Do not attach any additional pages

**Please submit to your premedical advisor by the date requested:**

- a. Signed, completed application
- b. Current resume
- c. Projected coursework for junior and senior years
- d. Official high school transcript
- e. Official college transcript
- f. Send official transcripts from any university/college you have attended. This includes college work during high school (must be sent electronically)
- g. Official ACT/SAT scores (if not on your high school transcript -must be sent electronically)

**-Three (3) letters of recommendation in PDF format to your premedical advisor**

- One letter of reference from your premed advisor
- Two additional letters of recommendation (at least one should be from a science professor)

**-Applications due to GW via BOX by March 25th-**

**\*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. I understand if conditionally accepted I must undergo a criminal background check via the AMCAS application service. I have reviewed the Technical Standards policy. No part of this application was created using artificial intelligence, any other available tools or another author but it is only my own writing.

I acknowledge that I understand that matriculation into the MD program is conditional. If I do not meet the criteria set by the Committee on Admissions and specified in my contract I will be dismissed from the early selection program and the decision will be final.

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](mailto: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](mailto:eeo@gwu.edu)