

## VCU Early Selection Application

### Biographical Information

1. First Name: \_\_\_\_\_
2. Last Name: \_\_\_\_\_
3. Preferred Name (*if different*): \_\_\_\_\_
4. Preferred Pronouns: \_\_\_\_\_
5. GMU Email Address (*This is how you will be contacted*): \_\_\_\_\_@gmu.edu
6. Home/Permanent Mailing Address:  
\_\_\_\_\_
7. Phone Number: \_\_\_\_\_
8. High School attended: \_\_\_\_\_  
City, State: \_\_\_\_\_ Graduation Year: 20\_\_\_\_
9. List all colleges/universities that you have attended. *Please submit transcripts from all universities attended.* \_\_\_\_\_
10. Place of birth (City, state, country): \_\_\_\_\_
11. Citizenship:  U.S. Citizen       U.S. Permanent Resident       Other
12. (*Optional*) How would you describe yourself? Please check all that apply:  
 Black, Non-Hispanic                       White, Non-Hispanic  
 Hispanic                                       Asian or Pacific Islander  
 Native American, Alaskan Native, or Native Hawaiian  
 Socioeconomically Disadvantaged       1<sup>st</sup> Generation College Student  
 Other

## Academic Information

Leave blank if you don't have one.

13. Major(s): \_\_\_\_\_

14. Minor(s): \_\_\_\_\_

15. What is your overall cumulative GPA? (*Minimum of 3.5 required*): \_\_\_\_\_

16. What is your overall BCPM GPA? (*Minimum of 3.4 required. BCPM=Biology,*

*Chemistry, Physics, Math courses. Use a GPA calculator:*

*<https://gpacalculator.net/college-gpa-calculator/>): \_\_\_\_\_*

17. Have you ever received a grade of C+, C, C-, or lower in any science courses?

Yes       No

18. If yes, which class(es) and which semester(s)? If no, leave blank:

\_\_\_\_\_

## Letters of Recommendation

19. Please provide the names of three individuals who will write a letter of recommendation for you. Two should be from different science departments and one should be non-science.

Name of Letter Writer 1: \_\_\_\_\_

Name of Letter Writer 2: \_\_\_\_\_

Name of Letter Writer 3: \_\_\_\_\_

**Criminal Background/Academic Sanctions**

All selected students will be required to submit to a criminal background check before matriculating.

20. Have you ever been convicted of, or plead no contest to a misdemeanor or felony crime?

Yes       No

If yes, please explain. If no, leave blank.

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21. Were you ever the recipient of any institutional action by any college or university 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.

Yes       No

If yes, please explain. If no, leave blank.

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**Experiences**

Please list clinical, volunteering, research, or other significant experiences completed during college. *You will also need to submit a resume with your application. If you would prefer to list these activities in a separate document to attach with your application, you may do so. Please clearly label the question number if attaching a separate document.*

**Include the following for each experience:** name of organization(s), date of your experience(s), hours participated per week, total experience hours you've participated, and your role/responsibilities/work description

22. Use the space below to detail your college clinical experiences.

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23. Use the space below to detail your college/community volunteer experiences.

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24. Use the space below to detail your college research experiences.

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25. Use the space below to detail any other college experiences that you feel are pertinent.

This could include extra-curricular, leadership involvement, or other work experiences.

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**Junior/Senior Year Plans**

Please provide a description of your academic and extracurricular goals for your junior/senior years of college work. Please include your intended classes (include course titles and numbers) by semester and your intentions regarding experiences. *If you would prefer to list these plans in a separate document to attach with your application, you may do so. Please clearly label the question number if attaching a separate document.*

26. Academic plans:

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27. Extracurricular plans:

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**Essays:**

28. Why do you want to attend the VCU School of Medicine? *Answer limit = 100 words*

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29. Why do you want to be a doctor? *Answer limit = 200 words*

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## Application Process and Agreements

30. I understand that this is a competitive process, and that the decision of the George Mason University Health Professions Advising Office is final.

Yes       No

31. I understand that I will be contacted and required to interview with the George Mason University Health Professions Office only if I am a finalist.

Yes       No

32. If provisionally accepted into the Early Selection Program, I understand that I will need to:

- Take additional science coursework.
- Maintain a 3.5 overall GPA and 3.4 BCPM GPA (with no C's or lower in science courses).
- Continue to gain clinical, volunteer, and other experiences.
- Meet with a representative of the VCU School of Medicine periodically
- Meet with the George Mason Pre-Health Advisor once a semester until I graduate.
- File an AMCAS application.
- Take the MCAT by the end of junior year (spring or early summer) on a timeline set by VCU and achieve a score as determined by VCU.
- Complete other activities designated by VCU School of Medicine or George Mason Pre-Health Advisor.

Yes       No

32. By signing this application, I certify that the answers to all of these application questions are my own and have not been written, in part or in whole, by a third-party.

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Applicant Signature

*Your typed/electronic signature is the legal equivalent of your manual/handwritten signature.*

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Date