

College of Public Health and Human Sciences

Pre-medical Student Information Sheet

(To be completed the year in which you apply.)

Name: _____

Phone: _____

Home Address: _____

Email: _____

(non-ONID if graduating) _____

Applying:
(MD) AMCAS ID#: _____

Major: _____

(DO) AACOMAS ID#: _____

Date of Graduation: _____

Year you intend to apply to medical school: _____

What date did you (or do you intend to) take the MCAT? _____

How will you/did you prepare? _____

Scores (if known) _____

Cumulative GPA (to date) _____ Science/Math (BCPM) GPA: _____

Signatures from members of the Pre-medical Committee:

Pre-med Advisor's Signature: _____

*Pre-Med Committee Member if GPA < 3.2 and/or MCAT <: _____

Names of those who have agreed to write letters:

(science) _____ (science) _____

(MD/DO) _____

Major Professor(s) _____

Schools you know you will be applying to: _____

Will you have completed all necessary coursework for the MCAT before taking the exam (general chemistry, organic chemistry, biology, biochem, physics, and at least 3 or 4 liberal arts courses)?

___Yes ___No

Additional information for (name): _____

1. Do you work during the school year? ___Yes ___No If yes, where? _____
What do you do in this job?

Please specify hours per week:

2. List all research experience and the timeframe:

3. List all medical/clinical experience (such as shadowing, scribe, etc.):

4. List all community service and volunteering (include timeframe):

5. List any international experience (include timeframe):

6. List any leadership roles you have held post high school (include timeframe):

7. List all your activities, hobbies, etc.:

8. Ethnicity (optional): ___Caucasian ___Black/African American ___American Indian
___Alaska Native ___Hispanic ___Asian/Pacific Islander ___Other

9. Are you a first-generation college student? ___Yes ___No

10. If you have anything which may come up on a criminal background check, please explain.

11. What makes your application stand out from the others? (How are you unique? What are your greatest strengths?) Use this space & back for any additional information you wish the committee to know that is not on your AMCAS application.