



## **Biographic Information**

Legal First				Legal Last			
Name:			Name:				
Preferred First							
Name:							
Address:			Apt #	City, State			Zip code:
Sex:				Gender:			Preferred Pronouns:
Race/Ethnicity: (Check all that apply)	African American/ Black	U White	American Alaska Native	-	Asian/ Pacific Islande		panic/ 🗌 Other: atino
Check all that apply:		background	om a disadva om an undei	-	studen	m a 1 <sup>st</sup> generation college It n a veteran, or graduate of care system	
Your Email:			Phone:				
AAMC ID Numb							
**Must Have AA	MC ID to interview						

## **MCAT History**

Have you taken the MCAT	Yes If <u>yes, test Date #1:</u>
	Scores: CP: CARS: BB: PS: Total:
	I <u>f applicable, test Date #2:</u> Scores: CP: CARS: BB: PS: Total:
	test Date #3 Scores: CP: CARS: BB: PS: Total:
	□ No





## **Education History**

Graduating High School (include city and state)			
List any/all college(s) attended while a high school student			
List any/all college(s) attended after high school			
Partner University	Cleveland State U	niversity	
Current CSU Student Status (must be Sophomore or Junior)			
Overall cumulative college GPA:			
Indicate completion and/or expected completion of the following courses: ** Courses listed must be completed by start of the 2024 fall semester	General Chemis	stry I (or equivalent) when? (year only) OR expected completion? (year and term)	
	General Chemis	stry I Lab (or equivalent)	
	Completed	when? (year only) OR expected completion? (year and term)	
	General Chemis	stry II (or equivalent)	
	Completed	when? (year only)	Grade received





	In Progress	OR expected completion? (year and term)	
-	General Chemis	stry II Lab (or equivalent)	
	Completed	when? (year only) OR	Grade received
-	In Progress	expected completion? (year and term)	
	General Biology	V I (or equivalent)	
	Completed	when? (year only) OR	Grade received
-	In Progress	expected completion? (year and term)	
	General Biology	<b>I Lab</b> (or equivalent)	
		when? (year only) OR	
	In Progress	expected completion? (year and term)	

### Year of Intended Matriculation to NEOMED

	(Select one)
Select expected year of matriculation (1 <sup>st</sup> year as a medical student)	July 2025
Matriculation year will be determined and confirmed during interviews.	July 2026





#### Experiences, Employment, Activities, Awards, Honors

Indicate the experiences, employment, activities, awards, and honors you have achieved following matriculation into college. Please do not include high school activities.

#### For the column marked "Experience Type", please use the following lexicon to best describe the experience:

Paid employment, community service, co-curricular activity, awards/honor, physician shadowing, research/lab, leadership position, family responsibility.

\*\*Please limit your experience to up-to 10 total entries.

ify which is ur most aningful erience? nly choose one)	on to	Place of Experience, Experience Description, Contact Person to Verify Experience & Contact Person Email Address	Estimated Hours	Start Date and End Date	Experience Type













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#### **Essay Section**

In 200 words or less indicate why you chose the most meaningful experience you chose.





Pathways to Practice Undergraduate Early Assurance Application nd why you are motivated to

In 250 words or less, tell us why you want to attend NEOMED and why you are motivated to pursue a binding admission plan to medical school.





# This is not an application for medical school admission. For the sake of disclosure please read the following items carefully:

- I understand that I am requesting early assurance to the College of Medicine M.D. program at the Northeast Ohio Medical University (NEOMED). I am not applying for admission to medical school at NEOMED at this time.
- I have read the sections in the current NEOMED Compass regarding early assurance to medical school and the NEOMED College of Medicine Essential Functions Required for Admission, Continuation and Graduation in the most current version of the NEOMED Compass.
- I understand the academic metrics that will be used to determine my admission to the M.D. program in the College of Medicine at NEOMED at the time of application as communicated in the current version of the NEOMED Compass.
- I understand that I must have a bachelor's degree from my current partner university prior to matriculate to medical school at NEOMED.
- I understand that all of my academic metrics used for admission to the M.D. program in the College of Medicine at NEOMED, such as grade point averages, will be calculated by the American Association of Medical Colleges application system (known as AMCAS). My current academic advisor has explained how these calculations will differ from my university grade point average calculations.
- If I have ever been found responsible for any academic violation(s) while enrolled in college/university level coursework (after high school) (e.g. plagiarism, academic dishonesty. etc.) these must be disclosed at the time of application to medical school at NEOMED through AMCAS. Review of these violations will occur at the time of an admission decision at a later date. Early assurance status does not imply that any academic violation(s) while enrolled in college/university level coursework (after high school) may not result in a denial of admission at a later date.
- If I have ever been convicted of, or pleaded guilty or no contest to, any criminal offense in a court of law these must be disclosed at the time of application to medical school at NEOMED through AMCAS. Review of these offenses will occur at the time of an admission decision at a later date. Early assurance status does not imply that any offenses may not result in a denial of admission at a later date.
- At this date, only U.S. Citizens or U.S. Permanent Residents are permitted to be admitted and matriculate to the M.D. program in the College of Medicine at NEOMED.
- Any falsifications or omissions to the above will result in either my non-selection as an early assurance candidate, forfeiture of early assurance if discovered at a later date, or denial of admission at the time of application if discovered at a later date.
- I understand that I will need to undergo a criminal background check (CBC) if I am admitted to NEOMED.

I have read and understand all of the above items:

Signature (your typed name will serve as your signature)

Date