

Post Baccalaureate Program – Application Instruction Manual

Dear Applicant,

Thank you for your interest in applying to the Lewis Katz School of Medicine Post Baccalaureate Pre-medical program.

Applicants to the Postbaccalaureate Pre-medical Program (ACMS or BCMS) apply through Temple University's Graduate School: http://www.temple.edu/apply/common/appcheck.asp. Once you submit your application, you will receive an email from the Graduate School with your assigned TU ID number (9 digit number beginning with 9). The following pages include detailed instructions to serve as a guide in completing the application. Please be sure to thoroughly read the entire Instruction Manual.

<u>NOTE</u>: This is a self-managed application process; therefore, applicants are expected to monitor the status and receipt of all application materials through <u>TUPortal</u>.

The two available program options include:

Basic Core in Medical Sciences Program (BCMS) - "Career Changers"

- For candidates who have not taken the basic science courses required for admission.
- Rigorous full-time (34 credit hours) 12-month non-degree program.
- No more than 8 credits in Biology, Chemistry, Physics. Note: This does not include mathematics.

Advanced Core in Medical Sciences Program (ACMS) - "Career Enhancers"

- For candidates who completed LWSOM's premedical requirements and wish to enhance their academic background before medical school.
- Rigorous full-time (23 credit hours) 10-month non-degree program.

There will be no deadline extensions for incomplete applications, including supporting materials.

	BCMS	ACMS
Application Opens	October 15	October 15
Application Closes	March 1	June 1
All Supporting Materials Due	March 15	June 15

Best of luck in the application process,

Office of Admissions
Lewis Katz School of Medicine at Temple University

Quick Links

<u>Application Instructions</u> <u>Institutional Action</u> <u>Personal Information</u>

<u>Clinical and Regional Campuses</u>
<u>Letters of Recommendation</u>
<u>Previous Colleges Attended</u>

<u>Essays</u> <u>Misdemeanor</u> <u>Science GPA Calculator</u>

Felony Name Standardized Tests

High School Information Parent/Guardian Information Summary: Submitting Materials

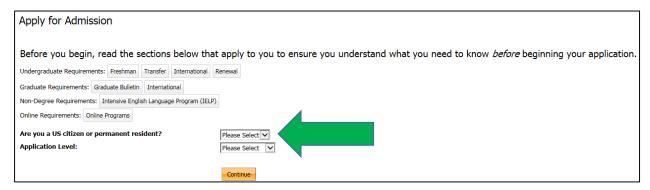


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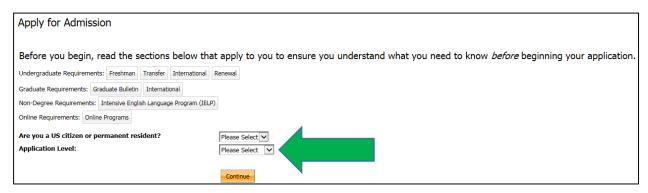
APPLICATION INSTRUCTIONS

Are you a US citizen or permanent resident?

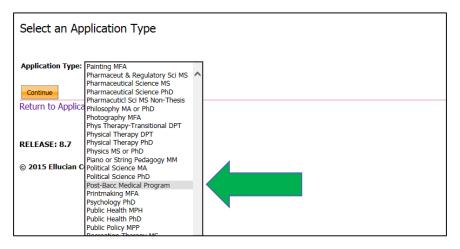
Temple will only consider applications from U.S. citizens or non-citizens who have permanent resident or refugee/asylee status with the U.S. Immigration and Naturalization Service (INS). Applicants with permanent resident or refugee/asylee status need to email a pdf copy of official INS documentation to postbac@temple.edu; please save with the file name, TU ID, Last name, First Name. The email subject should read: INS, TU ID, Last name, First Name. Please do not send paper copies.



Application level: Select GRADUATE.



Select an Application type: Post-Bacc Premedical Program



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Admission Term:

For ACMS: Fall 2016 For BCMS: Summer I 2016

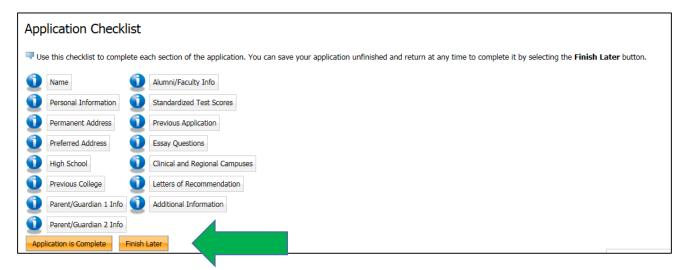
0. 50.00. 60.00. 1. 20.20					
Apply for Admissions					
Undergraduate applicants may only apply once in each semester.					
Do not submit additional applications to make changes. Additional Applications will not be processed and may cause delays. To make corrections to a previously submitted web application, please email us at ugapp@temple.edu					
* - indicates a required field.					
Application Type: Post-Bacc Medical Program					
Admission Term:					
First Name:*					
Middle Name:					
Last Name:*					
Fill Out Application					

The application is designed in modules (Name, Personal Information, etc.) so that an applicant can return to the application by clicking "Finish Later" if unable to complete the application in one sitting.

NAME

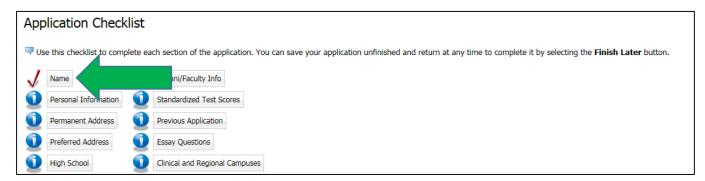
NAME

Enter your full legal name as it appears on your Social Security card, your Canadian Social Insurance card, or other legal documentation.



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The Applicant Checklist will show a red check mark as an applicant completes each section of the application.



PERSONAL INFORMATION

CITIZENSHIP

If you have any type of visa or Permanent Resident status, then you are not a U.S. citizen. If you are currently applying for U.S. citizenship, but it has yet not been granted, you are not considered a U.S. citizen.

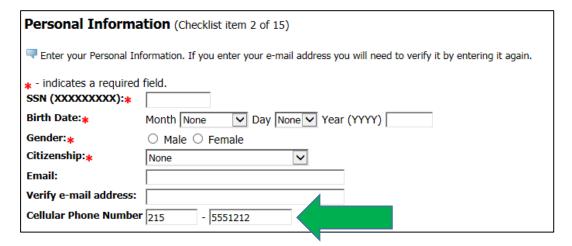
Do not select Permanent Resident unless you currently possess a valid Alien Registration Receipt Card (Green Card). If you are currently applying for an Alien Registration Receipt Card, but it has not yet been granted, do not select Permanent Resident.

If you have Refugee/Asylee status, please select Permanent Resident status and email postbacc@temple.edu to notify the Admissions Office. The Admissions Office will update your information.

The application is not submitted for review until the non-refundable \$50 application is paid online.

CELLULAR PHONE NUMBER

Please note the formatting for the cellular phone number field. The left block should include the AREA CODE ONLY; the right block should include the phone number without dashes, spaces or commas. See example below.





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LEGAL RESIDENCE

Please type the county and state abbreviation (PA, NJ, NY, etc.) in which you are a legal resident. If you qualify for residency in more than one state, you may declare only one of those states as your legal residence on application materials.

Please check Temple University's standards for legal residence here:

http://www.temple.edu/registrar/documents/downloads/PennsylvaniaResidencyGuidelinesandApplication.pdf

DISADVANTAGED STATUS

An applicant might consider yourself disadvantaged if you grew up in an area that was medically underserved or had insufficient access to State and Federal Assistance programs.

Underserved: Do you believe, based on your own experiences or the experiences of family and friends, that the area in which you grew up was adequately served by the available health care professionals? Were there enough physicians, nurses, hospitals, clinics, and other health care service providers?

Immediate Family: The Federal Government broadly defines "immediate family" as "spouse, parent, child, sibling, mother or father-in-law, son or daughter-in-law, or sister or brother-in-law, including step and adoptive relationships."

State and Federal Assistance Programs: These programs are specifically defined as "Means-Tested Programs" under which the individual, family, or household income and assets must be below specified thresholds. The sponsoring agencies then provide cash and non-cash assistance to eligible individuals, families, or households. Such programs include welfare benefit programs (federal, state, and local) Aid to Families with Dependent Children (AFDC or ADC); unemployment compensation; General Assistance (GA); food stamps; Supplemental Security Income (SSI); Medicaid; housing assistance; or other federal, state, or local financial assistance programs.

MILITARY SERVICE

Indicate whether you have or are currently serving in the United States Military by clicking Yes or No. If you would rather not provide this information, select No Response. If you select "Yes", indicate your anticipated military status at the time of enrollment to medical school by selecting one of the options provided.

HIGH SCHOOL and PREVIOUS COLLEGE

<u>High School</u>: Click on "Lookup High School Code" and follow the instructions as seen on the page. This should indicate the high school from which you graduated from.

<u>College</u>: Click on "Lookup College Code" and follow the instructions as seen on the page. List ALL previous colleges attended, regardless if you earned a degree or completed college coursework during high school.

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PARENT/GUARDIAN INFORMATION

There are two available screens for your parent/guardian information. Please complete both screens for each parent/guardian.

PARENT/GUARDIAN OCCUPATION

Type each parent/guardian's occupation in the provided box. Please include the occupational category AND the specific title; be specific in your description. The categories include:

Healthcare Practitioners and Technical Occupations (example: Physician)

Healthcare Support Occupations (example: Nursing/Physical Therapy)

Business, Executive, Management, Financial Occupations

Engineering and Architecture Occupations

Education, Training, and Library Occupations (example: Teacher at College or Primary School Level)

Other Professional Occupations

Office and Administrative Support Occupations

Service Occupations (example: Police, Firefighter, Building and Grounds Services)

Agriculture, Maintenance, Repair, and Skilled Craft Occupations

Transportation Occupations

Other (example: military, homemaker, unknown)

If you are not aware of this person's occupation, please type "Don't know

PARENT/GUARDIAN HIGHEST EDUCATION LEVEL

Please type one of the following options:

Less than high school

High school graduate (high school diploma or equivalent)

Some college, but no degree

Associates Degree (AS, AN, etc.)

Bachelor Degree (BA, BS, etc.)

Some graduate, but no degree

Masters Degree

Doctorate or Professional Degree:

Doctor of Medicine (MD)

MD/PhD

Doctor of Osteopathic Medicine/Osteopathy (DO)

Doctor of Dental Science (DDS, DMD)

Doctor of Jurisprudence

Doctor of Chiropractic

Doctor of Optometry

Doctor of Pharmacy

Doctor of Podiatric Medicine/Podiatry

Doctor of Veterinary Medicine

Doctor of Philosophy (PhD)

Doctor of Science

Doctor of Education

Other Doctorate Degree

Don't know



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STANDARDIZED TEST SCORES

Please note which standardized test scores that you plan to submit in support of your application. You may select one or multiple standardized test score options. Please note:

- <u>SAT</u> score reports must be requested through the College Board (https://sat.collegeboard.org/home) to be sent to the Temple Office of Undergraduate Admissions Code = 2906.
- <u>ACT</u> score reports must be requested through ACT (http://www.actstudent.org/) to be sent to the Temple Office of Undergraduate Admissions Code = 3724.
- <u>GRE</u> Score reports must be electronically requested through Educational Testing Service (http://www.ets.org/gre) to be sent to Temple University Graduate School. Code = 2906
- For ACMS applicants who have taken the <u>MCAT</u>, please select Temple University School of Medicine in the MCAT Score Reporting System (https://services.aamc.org/30/scoreReportingWeb/) to send your scores electronically.

ALUMNI/FACULTY INFO

These questions are required whether or not regardless of your alumni status.

ESSAY QUESTIONS

All applicants are required to answer essay questions #1-7.

The Personal Comments essay is an opportunity to distinguish yourself from other applicants. Consider and write your Personal Comments carefully. Some questions you may want to consider while writing this essay are:

- Why have you selected the field of medicine?
- What motivates you to learn more about medicine?
- What do you want LKSOM to know about you that hasn't been disclosed in other sections of the application?

In addition, you may wish to include information such as:

- Special hardships, challenges, or obstacles that may have influenced your educational pursuits.
- Commentary on significant fluctuations in your academic record that are not explained elsewhere in your application.

PROGRAM OF STUDY

PLANNED COURSE OF STUDY

Please select from:

Basic Core in Medical Sciences Program (BCMS) – "Career Changers"

- For candidates who have not taken the basic science courses required for admission.
- Rigorous full-time (34 credit hours) 12-month non-degree program.
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CLINICAL CAMPUS OPPORTUNITIES

Medical students have three clinical campus opportunities in Pennsylvania.

- Our Regional Campus at **St. Luke's Hospital in Bethlehem** provides the unique opportunity for 30 students to complete the first year of medical school in Philadelphia and spend years 2, 3, and 4 in Bethlehem.
- Our Clinical campus site at the **Geisinger Health System in Danville** provides the opportunity for students to complete all their third and fourth year required clerkships in Danville.
- Students may also elect to remain in the Philadelphia region for the third and fourth years by selecting **Temple University Health System and affiliates**.

More information can be found at:

Geisinger Health System clinical campus: www.geisinger.edu

St. Luke's University Hospital regional campus: temple-stlukes.slhn.org

Temple University Health System and affiliates: www.templehealth.org/content/default.htm

In the spaces provided, please provide your first, second, and third choice for clinical and regional campuses.

Please copy and paste the full name as seen below:

Geisinger Health System
St. Luke's University Hospital
Temple University Health System

LETTERS OF RECOMMENDATION

BCMS applicants are asked to submit a minimum of three (3) supportive letters of recommendation.

- Recent college graduates should submit two (2) letters from their undergraduate institution and one (1) letter from an employment or volunteer experience.
- If you earned your bachelor's degree prior to 2013, AND you are submitting individual letters, we will accept one (1) letter from your undergraduate institution and two (2) other letters from an employment or volunteer experience will suffice.

ACMS applicants are asked to submit:

- Letters from an undergraduate pre-health committee, a packet from a school letter compilation service, or three (3) individual letters.
 - o If submitting a compilation packet or individual letters, two (2) letters must be from professors with whom you completed coursework from the AMCAS course classification of Biology, Chemistry, or Physics.
 - One (1) additional letter is required from a non-science professor, work experience, or service activity.
- We welcome letters from research experiences, but they will not fulfill our science letter requirement.
- If there is a compelling reason why you cannot obtain two letters from science instructors, we will review your application with the letters provided. Please indicate on the application why you are unable to provide the requested letters.



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OTHER INFORMATION: INSTITUTIONAL ACTION

You must answer YES to this question if you were ever the recipient of any institutional action by any college or medical school for unacceptable academic performance or conduct violation, even if such action did not interrupt your enrollment or require 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.

If you answer YES, you must briefly explain each instance, along with the date(s) of occurrence (MM/YYYY).

If you become the subject of an institutional action after certifying and submitting this Temple University application, you must inform us within 10 business days of the date of the occurrence by emailing postbacc@temple.edu, subject line: Institutional Action, TU ID, Last Name, First Name.

IF YOU ANSWER YES, ADDITIONAL INFORMATION NEEDED

Applicants who indicate that they were the recipient of an institutional action are required to submit an official statement from the institution. This document must contain details of the event and the outcome of the institutional process and be addressed to the Sr. Associate Dean for Admissions, Lewis Katz School of Medicine at Temple University.

Applications with an institutional action will not be reviewed until this letter has been received. If an institutional action occurs after the application has been submitted, a letter must be submitted within ten days of occurrence with details of the event.

We will only accept Institutional Action statements mailed directly to our office from the appropriate institutional official (Dean of Students, Judicial Officer, etc.). A statement within your pre-health committee letter does not meet our requirement.

OTHER INFORMATION: MISDEMEANOR

You must indicate whether you ever been convicted of, or pleaded guilty or no contest to, a Misdemeanor crime, excluding 1) any offense for which you were adjudicated as a juvenile, 2) any convictions which have been expunged or sealed by a court, or 3) any misdemeanor convictions for which any probation has been completed and the case dismissed by the court (in states where applicable). Below you will find state-specific notifications that these states mandate for inclusion alongside our question. These state-specific mandates are included here by regulatory mandate and may repeat information included elsewhere in this document.

You must inform the Lewis Katz School of Medicine at Temple University if you are convicted of, or plead guilty or no contest to, a misdemeanor crime after the date of your original Temple University application submission. Please inform us within 10 business days of the date of the occurrence by emailing postbacc@temple.edu, subject line: MISDEMEANOR, TU ID, Last Name, First Name.

OTHER INFORMATION: FELONY

You must indicate whether you have ever been convicted of, or pleaded guilty or no contest to, a Felony crime, excluding 1) any offense for which you were adjudicated as a juvenile or 2) convictions which have been expunged or sealed by a court (in states where applicable). Below you will find state-specific notifications that these states mandate for inclusion alongside our question.

You must inform the Lewis Katz School of Medicine at Temple University if you are convicted of, or plead guilty or no contest to, a felony crime after the date of your original Temple University application submission. Please inform us within 10 business days of the date of the occurrence by emailing postbacc@temple.edu, subject line: FELONY, TU ID, Last Name, First Name.



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RESUME

A professional resume or a CV is required. Applicants should email their resume or CV as a .pdf attachment to postbac@temple.edu; please save with the file name: TU ID, Last name, First Name, Resume. The email subject should read: TU ID, Last name, First Name, Resume.

Please do not send paper copies.

SCIENCE GPA CALCULATOR

The SGPA Calculator is programmed to calculate your GPA for all courses taken in Biology, Chemistry, Physics, and Math (BCPM). LKSOM will verify your course listing alongside of your official transcript.

When completing, please list all courses in chronological order.

The completed science GPA calculator, as an .xls, should be emailed to postbac@temple.edu. please save with the file name: TU ID, Last name, First Name, SGPA. The email subject should read: TU ID, Last name, First Name, SGPA.

Please do not send paper copies.



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SUMMARY: SUBMITTING MATERIALS

		Required?	Type of Submission	Details
Standardized Test Scores	SAT Scores	Required – SAT or	Electronic/Online	Sent to Temple Office of Undergraduate Admissions –
		ACT	https://sat.collegeboard.org/home	CODE 2906
	ACT Scores	Required – SAT or	Electronic/Online	Sent to Temple Office of Undergraduate Admissions =
	ACT Scores	ACT	http://www.actstudent.org/	CODE 3724
	GRE Scores	Optional	Electronic/Online	Temple University Graduate School. Code = 2906
			http://www.ets.org/gre	Temple Cinicality Cradadic Concest Code 2500
	MCAT	Optional	MCAT Score Reporting System	
			https://services.aamc.org/30/scoreRe	Temple University School of Medicine
			portingWeb/	
uc	Postal Mail		Hard copy, mailed to:	
			PB Office of Admissions	Official latter hand with a circulature
of Jati		Required	3500 N. Broad Street	Official letterhead with a signature
enc			MERB, Suite 124 Philadelphia, PA 19140	
Letters of ommenda			Electronic/Online	
Letters of Recommendation	Interfolio		http://www.interfolio.com/	Applicable fee
Re		1	Electronic/Online	
	VirtualEvals		http://www.virtualevals.org	Free for academic advisors
	II.		Hard copy, mailed to:	
			PB Office of Admissions	
		Required from all	3500 N. Broad Street	Official sealed envelopes mailed directly from the institution, not delivered by hand by the applicant.
7	Transcripts	higher education	MERB, Suite 124	institution, not delivered by hand by the applicant.
		institutions attended	Philadelphia, PA 19140	
		Electronic/Online via your university's	Official electronic/online submission of transcripts, not	
			e-transcript process.	forwarded or attached to an email by the applicant.
		Required	Floatronic via Empil	.pdf attachment
R	Resume/CV		Electronic via Email postbac@temple.edu	File name, TU ID, Last name, First Name, Resume
Resultie/CV		Required	postbace temple.eau	
				Email subject: TU ID, Last name, First Name, Resume
		Required		.xls attachment
Science	e GPA Calculator		Electronic via Email	File name, TU ID, Last name, First Name, SGPA.
			postbac@temple.edu	
			Hard copy, mailed to:	Email subject: TU ID, Last name, First Name, SGPA.
Institutional Action Letter		Required if you were	PB Office of Admissions	Institutional Action statements must be mailed directly
		the recipient of any	3500 N. Broad Street	to our office from the appropriate institutional official
		institutional action.	MERB, Suite 124	(Dean of Students, Judicial Officer, etc.).
			Philadelphia, PA 19140	(
Green Card/INS documentation		Required if you are a		.jpeg or .jpg or .pdf attachment
		Permanent	Electronic via Email	
		Resident/Asylee	postbac@temple.edu	File name, TU ID, Last name, First Name.
		Status		Email subject: INS, TU ID, Last name, First Name
Update Letter		Optional	Electronic via Email	
			postbac@temple.edu	
				.jpeg or .jpg attachment
Photo		Required if you are	Electronic via Email	File name TUID Last name First Name
		invited to interview	postbac@temple.edu	File name, TU ID, Last name, First Name
				Email subject: Photo, TU ID, Last name, First Name.
				Email subject. Filoto, 10 10, Last Haille, Filst Naille.



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