Instructions for M.D. Transfer Applications

Please read the following information carefully before completing the application for advanced standing.

ALL APPLICANTS:
All applicants must have had a minimum of 100 semester hours of undergraduate work at an accredited American or Canadian college or university which must include one year of biology, two years of chemistry (including organic chemistry), and one year of physics. All applicants must have taken the MCAT.

Applicants are expected to have grades of “C” or better in all required undergraduate courses.

An official copy of MCAT scores is required for all applicants. Third year applicants must provide official USMLE scores. Official transcripts from each undergraduate college are required as well as an up-to-date medical school transcript. Three letters of evaluation are required: one from the Dean of the medical school currently attended and two from members of the faculty. Competitive applicants will be invited to interview at EVMS.

APPLICANTS FOR THE SECOND YEAR:
Applicants for the second year who are currently enrolled and have completed one or more years in a medical school accredited by the Liaison Committee on Medical Education (LCME) can be considered for transfer into the second of our curriculum to fill existing vacancies. Only U.S. citizens or permanent residents of the U.S. will be considered for admission. Applicants for transfer into the second year must have satisfactorily completed the following basic medical school courses or their equivalents: Molecular Cell Biology, Immunology, Anatomy (including Neuroanatomy), Biochemistry, Histology, Physiology and Basic Clinical Skills, which must include medical Interviewing and Physical Diagnosis.

APPLICANTS FOR THE THIRD YEAR:
Applicants for the third year who are currently enrolled and have completed one or more years in a medical school can be considered for transfer into the third of our curriculum to fill existing vacancies. Only U.S. citizens or permanent residents of the U.S. will be considered for admission. Applicants for transfer into the third year from LCME accredited schools and non-LCME accredited schools must have taken and passed USMLE Step 1 above the national average.

Applicants for transfer into the third year must have satisfactorily completed the following basic science courses or their equivalents: Molecular Cell Biology, Anatomy (including Neuroanatomy), Biochemistry, Histology, Physiology, Neuroscience and Basic Clinical Skills, (including Medical Interviewing, Physical examination of all individual systems and Physical Diagnosis), Microbiology and Immunology, Pathology (general and systemic), Pharmacology, Pathophysiology, Medical Ethics, Behavioral Sciences, Psychopathology, Evidence Based Medicine and Biostatistics.

Students transferring into the third year of our curriculum should be ready to start the first clerkship (approximately the last week of June). It is anticipated that all applications will be reviewed, all interviews conducted, and all offers of acceptance made prior to May 1st.
Application for Advanced Standing into EVMS

Second Year [ ] Third Year [ ]

Deadline for all materials, including $100 application fee is March 1st.

Name ___________________________________________________________

(last)    (first)    (middle)

Sex ________ Date of Birth ___________________ SSN: ________________________________

Email Address: _________________________________________________________________

Permanent Address:

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

Were you born in the U.S.? ____________ State of legal residence _______________________

Telephone Number _____________________________ ____________________________

(Days)               (Evenings)

Parents/Guardian:

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<tr>
<th>Name</th>
<th>Living?</th>
<th>Occupation</th>
<th>Legal Residence</th>
<th>Education (Highest level)</th>
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<td>Guardian</td>
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List High School, and All Undergraduate, Graduate and Professional Schools Attended
(In chronological order beginning with most recent first)

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<tr>
<th>Name</th>
<th>Location</th>
<th>Dates of Attendance</th>
<th>Major</th>
<th>Degree (with date)</th>
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Post-Secondary Honors/Awards:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

List all extracurricular, community and/or avocational activities:
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__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

List all relevant post secondary employment. Indicate type of work and hours/week:
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If your education has not been continuous, indicate the reasons why:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
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Have you had any military experience? If yes, complete the following:

Branch of Service _________________ Highest rank or grade ____________________________
Date of Entry _________________ Date and type of discharge __________________________
Reserve Status _________________

Have you previously applied to EVMS graduate or medical programs? _________________
If yes, what year? _________________

Were you ever required to leave undergraduate, graduate, or professional school or denied
readmission because of deficiencies in conduct or scholarship? _________________
If yes, please explain: _______________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Do you have any chronic or recurrent condition that has interrupted your education or
employment? ______________. If yes, please explain:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
PERSONAL STATEMENT. Explain why you want to transfer into Eastern Virginia Medical School. (Do not exceed the space provided. Use a font of at least 10 points)
ACADEMIC RECORD (Please send official transcripts of all undergraduate, graduate, and professional school coursework).

Applicants for admission with advanced standing into EVMS must have successfully completed 100 hours of college level coursework at an accredited American or Canadian college or university. Included in the 100 hours must be ONE YEAR of BIOLOGY, TWO YEARS of CHEMISTRY (including Organic Chemistry) and ONE YEAR of PHYSICS. One year equals 2 semester, 3 quarters, or 1 semester and 2 quarters. Please indicate the courses that you have taken that fulfill these admission requirements.

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<thead>
<tr>
<th>SUBJECT</th>
<th>COURSE NAME/ NUMBER</th>
<th>CREDIT HOURS</th>
<th>GRADE</th>
<th>DATE COMPLETED</th>
<th>SCHOOL</th>
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<td>General Chemistry with Laboratory</td>
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<td>Organic Chemistry with Laboratory</td>
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<td>Biology with Laboratory</td>
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<td>Physics with Laboratory</td>
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Overall Undergraduate GPA ___________  Total Credit Hours ___________

Overall Graduate School GPA___________  Total Credit Hours ___________

Medical College Admission Test (MCAT)

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<th>Mo./Yr</th>
<th>Verbal Reasoning</th>
<th>Physical Sciences</th>
<th>Writing Sample</th>
<th>Biological Sciences</th>
<th>Overall MCAT</th>
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MEDICAL SCHOOL

GPA to date: ____________  Rank in class (if available): ____________

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<th>COURSE</th>
<th>FIRST YEAR CREDIT HOURS</th>
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<th>COURSE</th>
<th>SECOND YEAR CREDIT HOURS</th>
<th>GRADE</th>
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UNITED STATES MEDICAL LICENSING EXAMINATION - STEP 1
TEST DATE__________
Three-Digit Score ____________

CERTIFICATION STATEMENT
I have read and understand these instructions. I certify that the information in this application is complete and correct to the best of my knowledge.

_________________________________________                          __________________          
(Signature)                                           (Date)

RETURN YOUR COMPLETED APPLICATION TO:
OFFICE OF ADMISSIONS
EASTERN VIRGINIA MEDICAL SCHOOL
700 W. OLNEY ROAD
NORFOLK, VIRGINIA  23507-1607