



Pre-Medical Program  
West Chester University  
West Chester, PA 19383

Phone: 610-436-2978  
Fax: 610-436-3277  
[www.wcupa.edu](http://www.wcupa.edu)

Affiliate Programs: Drexel University School of Medicine, Penn State University College of Medicine,  
Temple University College of Medicine, Philadelphia College of Osteopathic Medicine  
Arcadia University M. S. In Physician Assistant Studies, & Temple University School of Dentistry

### **WCU PRE-MEDICAL PROGRAM SUPPLEMENTAL APPLICATION**

*Date* \_\_\_\_\_

*Name* \_\_\_\_\_

*Address* \_\_\_\_\_

*City, State, Zip* \_\_\_\_\_

*Telephone No. (Day)* \_\_\_\_\_ *(Eve)* \_\_\_\_\_

*Social Security #* \_\_\_\_\_

*E-Mail Address* \_\_\_\_\_

*High School* \_\_\_\_\_ *College(s)* \_\_\_\_\_

*Citizenship* \_\_\_\_\_ *U.S. Citizen* \_\_\_\_\_ *Resident Alien* \_\_\_\_\_ *Temporary Visa*

*Country* \_\_\_\_\_

*When do you wish to begin classess at West Chester University? (e.g.Fall, 2008)* \_\_\_\_\_

*Enter as a (circle)*     *Freshman*     *Transfer*     *Current WCU Undergrad*     *Post Baccalaureate*

*Will you be applying for Financial Aid?* \_\_\_\_\_

*How did you hear about WCU Pre-Medical Programs?* \_\_\_\_\_

**Career Goal** (circle): *Medicine Osteopathic Medicine Dentistry Physician's Assistant  
Physical Therapy Podiatry Optometry Veterinary Medicine Other \_\_\_\_\_*

*Alternative Field (second choice for career goal)\_\_\_\_\_*

**Academic Record**

*High School G.P.A. \_\_\_\_\_ High School Class Rank (e.g. 20/250) \_\_\_\_\_*

*SAT: Critical Reading \_\_\_\_\_ Math \_\_\_\_\_ Other \_\_\_\_\_*

*College GPA \_\_\_\_\_ College Major \_\_\_\_\_ College Graduation Year \_\_\_\_\_*

*GRE: Verbal \_\_\_\_\_ Analytical \_\_\_\_\_ Quantitative \_\_\_\_\_*

*MCAT: Verbal \_\_\_\_\_ Phys. Science \_\_\_\_\_ Biology \_\_\_\_\_ Writing \_\_\_\_\_*

*Awards, Honors:*

*Extra-Curricular Activities:*

*Health-care Experience, Work Experience, Projects:*

*Hobbies, Interests:*

***Please address the following questions. Respond on an attached page if you wish.***

- 1. Why are you interested in a medical (dental, veterinary) career?*
- 2. Have you had any experience(s), direct or indirect, that relate(s) to this interest?  
If so, describe them.*
- 3. Of what accomplishment(s) are you most proud? Why?*
- 4. If you were unable to gain admission to medical (dental, veterinary) school, what kind of  
an alternate career might you possibly pursue?*
- 5. Please attach a current picture and a 2-3 page autobiography, being sure to contextualize your  
decision to pursue a career in health care, and highlighting your activities and accomplishments  
to date. This autobiography should be updated yearly.*
- 6. If you are a post-baccalaureate student, please include a copy of your undergraduate  
transcripts, and a current resume.*

**Please print and return this completed form to:**

***Stephen J. Zimmiski, Ph.D.  
Director, Pre-Medical Programs  
West Chester University  
Pre-Medical Offices  
117 Schmucker Science Center South  
West Chester, PA 19383  
610-436-2978***