



Division Of Life Sciences, SAS
Office for Diversity and Academic Success in the Sciences
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INSTRUCTIONS TO ACCESS-MED PHASE I APPLICANTS

Dear Applicant,

Because you have expressed interest in applying to ACCESS-MED Phase I, the following procedures are recommended to facilitate your application process:

1. Open a file at one of the Health Professions Offices (HPO):

Rutgers Health Professions Office: Nelson Labs, Rm. A207, Busch Campus

Complete a registration form at HPO. Ask for evaluation forms and envelopes.

Obtain an ODASIS recommendation request envelope from your ODASIS Advisor as well

You must provide your professor with a HPO evaluation form and envelope as well as an ODASIS recommendation request Envelope.

2. Contact past professors, as soon as possible, for recommendations to be sent to ODASIS and the HPO office. ACCESS-MED requires a minimum of 2 recommendations (1 MUST be from a science or math professor). Additional letters may be submitted from non-science professors (ex. English professor or a non-science professor that knows you).

Note: Professors are not always available; therefore, it is advised that you request your recommendations early enough so that they can be sent directly to your HPO and ODASIS file prior to the ACCESS-MED deadline.

3. You may check to see if your letters of recommendation have arrived to HPO, by visiting the HPO website: <http://hpo.rutgers.edu>. You then must click on “The HPO drome” and sign in with your RU net ID and password.

In order to check if ODASIS has received your letter please contact your ODASIS Developmental Specialist.

4. Bring your completed ACCESS-MED application (including unofficial transcript and personal statement) to the ODASIS office (prior to the deadline date below) for preliminary review. ACCESS-MED application forms are available in the ODASIS office.

PRIORITY DEADLINE: _____

If we can be of any assistance or provide further information, please contact your respective ODASIS Advisor

NOTE: As an ACCESS-MED applicant, it is your responsibility to answer **all questions completely and accurately, on your application.** Incomplete or inaccurate information could delay your application process.

Best wishes for a successful year!



**DIVISION OF LIFE SCIENCES, SAS
OFFICE FOR DIVERSITY AND ACADEMIC SUCCESS IN THE SCIENCES (ODASIS)**



ACCESS-MED Phase I Application

All information provided is confidential. Please type or print.

GENERAL INFORMATION

1. Name: _____ 2. RU ID: _____
3. Present College: S.A.S S.E.B.S 4. Cell Phone Number: _____
 School of Engineering
5. Email Address: _____
6. Permanent Home Address: _____
Street _____ City _____
State _____ Zip Code _____ Home Phone Number _____
7. Date of Birth: _____ Sex: Male Female
8. Birthplace: _____
City _____ State _____ Country _____
9. Country of Citizenship: _____ Visa type: _____
10. Racial/ethnic self-description (**check only one**)
- | | |
|--|---|
| <input type="checkbox"/> Black/African-American | <input type="checkbox"/> Mexican-American/Chicano |
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Puerto Rican (Mainland) |
| <input type="checkbox"/> Puerto Rican (Commonwealth) | <input type="checkbox"/> Other Hispanic
Specify: _____ |

EDUCATIONAL HISTORY

1. Undergraduate colleges attended (Please list in order, beginning with the one you are currently attending.)

Name of School (eg. Rutgers University)	City, State	Major	Degree Month/Year Expected
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3. Are you a transfer student within the past year? Yes No

5. Current overall GPA: (3 DECIMAL PLACES) *GPA must include summer grades*

6. Current overall Science GPA: (2 DECIMAL PLACES) *GPA must include summer grades*

7. Please explain any W, D or F on your transcript in the space below.

11. How have you spent your summers during college?

14. If your education has not been continuous, indicate how your time was spent while not in school (e.g. Employment, military obligations, internship, etc.) :

POST-BACCALAUREATE ACADEMIC AND CAREER GOALS

- 1. Why are you interested in a health related profession? Why do you think that you are a good candidate for the ACCESS-MED Program? Respond to both questions with an informative essay (no more than 2 pages in length).**
2. Do you anticipate taking the MCAT/DAT or GRE? Please specify planned test dates.
Test:
Anticipated (Month/Year):
3. Is there anything unique about your background, education, or aspirations that you would like to bring to the attention of the Access-Med Admissions Committee to assist them in making a decision on your application?

FINANCIAL INFORMATION

1. A. Have you received an EOF grant? Yes No
B. Have you received any other type of government assistance (eg. TAG or Pell grant) or scholarship award?
 Yes No

Please list the grant(s) or scholarship(s) that you receive:

RECOMMENDATIONS

You will need 2 Letters of Recommendation from two college professors/ Teaching Assistants. One of the letters must be from a **science or math** instructor. The 2nd letter may be submitted from a professor in a non-science course. A **third** character reference is optional and it may be from a supervisor of a paid or volunteer position you have held; or an EOF (or other) college counselor and/or dean.

Reference 1

Name:

Department:

Position:

Phone Number:

Email Address:

Reference 2

Name:

Department:

Position:

Phone Number:

Email Address: