UMSL Pre-Health Program Application - Transfers

First Name: ___________________________ Last Name: ___________________________ Student #: __________________

Major: ___________________________ Current Overall GPA: __________

Year: Freshman | Sophomore | Junior | Senior | Post-Graduate | Graduate

Primary Pre-Health Interest (circle one):

- Medicine (MD & DO)
- Chiropractic Medicine
- Clinical Lab Science
- Dentistry
- Occupational Therapy
- Pharmacy
- Optometry
- Physical Therapy
- Podiatry
- Veterinary Medicine
- Physician Assistant
- Other:______________

Secondary Pre-Health Interest (circle one):

- Medicine (MD & DO)
- Chiropractic Medicine
- Clinical Lab Science
- Dentistry
- Occupational Therapy
- Pharmacy
- Optometry
- Physical Therapy
- Podiatry
- Veterinary Medicine
- Physician Assistant
- Other:______________

Completed Math and Science Courses:

Campus Engagement (list campus organizations you are active with, include research):
Off-Campus Engagement (list organizations you are active with for work, volunteering, and research):

Practical Healthcare Involvement:
Why are you interested in healthcare?

“Helping others” is a common response to the previous question. How will healthcare help you do that?
Alternative Plan

All UMSL Pre-Health students are encouraged to identify a parallel plan for success in addition to planning for their chosen pre-health track. Entrance into professional healthcare schools is highly competitive and requires excellence in GPA and test scores in addition to community engagement and a display of commitment to healthcare. Less than fifty percent of applicants nationwide are admitted to these schools. Alternative plans are vital in the event that a student’s interests and career plans change or a student is unable to gain admission to a particular professional healthcare program.

Questions to Consider When Choosing a Parallel Major

1. What were your favorite subject areas in high school? ________________________________________________

2. In which courses have you earned the highest grades? ________________________________________________

3. What do you do well (ie: organization, communication, physical activity, creativity, etc.)? __________________

4. What subject areas or skills are normally a struggle for you? _________________________________________

5. Who is one person you admire? Why? What does he/she do? _________________________________________

Majors/Programs to Consider

1. What is your preferred work environment upon graduation? ____________________________________

2. What classes would you prefer not to have to take (ie: writing, lab science, math, etc.)? _________________

3. What other majors/careers have you pictured yourself doing or considered in the past? ________________

4. Majors to explore for a parallel plan: ____________________________________________________________