



**SUPPLEMENTAL APPLICATION FOR ADMISSION:
MASTERS OF PUBLIC HEALTH (MPH)
Wayne State University School of Medicine (WSUSOM)
Department of Family Medicine & Public Health Sciences**

Application for admission for semester beginning: Fall 20__ ; Part-Time or Full-Time
(Please type or write legibly)

Return application materials to:
**MPH Degree Office, Room 205
101 E. Alexandrine
Wayne State University
Detroit, MI 48201**

PERSONAL INFORMATION

Full Name

_____ Gender: _____ (M or F)
Last First Middle Initial(s)

Different Surname(s) (if any) _____

Current Mailing Address

_____ Street City State/Country Zip Code

Telephone Number _____ Valid until _____ Email address _____
Month/Day/Year

Permanent Address (if different from Current Address)

_____ Street City State/Country Zip Code

Telephone Number: _____ Which address would you prefer for correspondence? Permanent Current

Country of Citizenship: _____ Place of Birth _____
(Give State also, if US Citizen) (Required of all international applicants)

If you are not a citizen of the United States, are you a permanent resident? Yes No

EDUCATION

List all undergraduate and graduate institutions attended, beginning with the most recent.

INSTITUTION	MAJOR	GPA	DEGREE AWARDED	DATES OF ATTENDANCE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

EXAMINATIONS TAKEN OR SCHEDULED

All students must arrange for official test scores to be forwarded directly to the Graduate School Admissions Office. Applications will not be complete until these are received.

	Date Taken/Scheduled	Score, if available
<input type="checkbox"/> GRE* Verbal	_____	_____
Quantitative	_____	_____
<input type="checkbox"/> TOEFL* (international students only) or	_____	_____
<input type="checkbox"/> IELTS	_____	_____
<input type="checkbox"/> MELAB	_____	_____

* Please provide the MPH office with copies of test scores as soon as they are available.

Request for GRE Waiver: Yes (A request for GRE waiver for physicians, dentists, graduate degrees, etc. can be made by submitting a written request with explanation and copies of licensure examinations as applicable).

OFFICIAL COLLEGE TRANSCRIPTS

Arrangements must be made for official transcripts to be submitted directly to the Graduate Admissions Office. Although applications will not be considered complete until all material has been received from the Graduate Admissions Office, inclusion of copies of transcripts and other documentation to the MPH office with this Supplemental Application form will expedite the review process. All applicants must have taken at least one college level course in mathematics (including statistics), social sciences, and natural sciences with at least "B" grades. Please note below your relevant course work.

Mathematics/Statistics: Course _____ Year _____ Grade _____ (preferably within last 5 yrs)
 Social Sciences: Course _____ Year _____ Grade _____
 Natural Sciences: Course _____ Year _____ Grade _____

RÉSUMÉ

Please attach a résumé or CV. This should include information about the colleges/universities that you have attended academic honors, publications, work experience, and any other professional or community activities that you consider to be relevant.

PERSONAL INTEREST STATEMENT

A Personal Interest Statement is also required and can be submitted online and/or sent directly to the MPH office. This should be a typed, double-spaced essay of no more than 500 words in which you describe why you want a MPH degree.

REFERENCES

Please provide information requested for those individuals who have agreed to submit professional letters of recommendation for you. These letters can be submitted online but are best sent directly to the MPH office by your references.

NAME	POSITION	TELEPHONE
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

ACADEMIC PROGRAM

I intend to concentrate in the following academic area (once admitted, students may change their concentration with permission from their advisor): Public Health Practice Occupational & Environmental Health

Application Materials Due: International Applicants: January 1
 U.S. Resident Applicants: February 15

Checklist:

- I have applied to the Graduate School Online
- I have arranged for official transcripts and the following test scores to be submitted to the Graduate Admissions Office
 - TOEFL or IELTS or MELAB or waiver request based on USMLE II CS.
 - Graduate Record Examination (GRE)
- I have arranged for three (3) Letters of Recommendation to be submitted
 - Online to the Graduate Admissions Office or
 - Directly by mail to the MPH office (**preferred**)
- FM & PHS Supplemental MPH Application with the following attachments:
 - Personal Interest Statement
 - Professional Résumé or CV
 - Copy of GRE Results or Waiver Request if applicable
 - Copies of undergraduate/graduate transcripts and test scores (TOEFL etc)
 - Copies of Professional Certificates, Licenses and/or Examination Results (e.g. USMLE I)

I certify that the information provided on my application form and related material is true, complete, and correct to the best of my knowledge. I understand that dishonesty, misrepresentation, or fraud in the admissions process may result in the rejection of an application, revocation of an offer of admission, or expulsion from the degree program.

SIGNATURE _____ **Date** _____

How did you first learn about this program?

- | | | |
|--|--|--|
| <input type="checkbox"/> WSU publication _____ | <input type="checkbox"/> Graduate School fair at _____ | <input type="checkbox"/> WSU faculty member |
| <input type="checkbox"/> WSU website _____ | <input type="checkbox"/> Advertisement in _____ | <input type="checkbox"/> Undergraduate advisor |
| <input type="checkbox"/> Non-WSU website _____ | <input type="checkbox"/> WSU student or graduate | <input type="checkbox"/> Other _____ |