



M.D. ADMISSION APPLICATION FORM

Information for consideration in the studies of:
Doctor of Medicine (M.D.) Degree Program

Academic Year 201	Semester: <input type="checkbox"/> January	<input type="checkbox"/> May	<input type="checkbox"/> September
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Please complete this form and return to:
Personal Assistant to the Dean of MD Admissions
International University School of Medicine (IUSOM)
P.O. Box # 59, Kaya Mofi 1-A, Kralendijk, Bonaire, Dutch Caribbean (Formerly Netherlands Antilles)
Tel: + 599-717-6792 Fax: + 599-717-8385
E.-Mail: admin@InternationalUniversity-SchoolOfMedicine.org

IMPORTANT

You can either proceed with this version of the application form or download the fill-in version from our website: <http://www.InternationalUniversity-SchoolOfMedicine.org>. Please read the whole form carefully prior to answering each question. Fill in using capital letters or fill in online preferred. Complete in full even if supporting appendices are enclosed. Check against the “materials required” on page 5 of this form to ensure that your application information is complete before forwarding it to IUSOM headquarters.

Personal Details

<p>Family Name (Last Name): Given Name(s): Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. Nationality: Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Date of Birth: (day / month / year) Telephone: (including country and area codes) Cellular: (including country code) Fax: (including country and area codes) E.-Mail: </p>	<p>Permanent Address: Temporary Address: (if applicable) Relationships If you have any relationships with academic and/or non-academic staff member(s) at IUSOM-Bonaire Campus and/or at any other IUSOM Campuses located elsewhere in the world, then please indicate IUSOM Campuses and your relationships of such sort in the space below. </p>
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Please State Which IUSOM Campuses you are Interested in:

- Bonaire México City Barranquilla Sialkot

Working Languages

At all IUSOM Campuses situated in various parts of the world, the medium of all instructions concerning M.D. Degree program is English. Please indicate below your proficiency in English, French and Spanish, and **any other language**.

Native / first language(s):

All other languages - please indicate your level of competence in the table below.

Language(s)	Able to Speak (yes/no)	Able to Read Documents (yes/no)	Able to write reports (yes/no)

Curriculum Vitae

Please provide your complete Curriculum Vitae in English as a separate document.

If you would like to point out any particularly significant aspects of educational and occupational career which may be important for your admission to the M.D. Degree Program at IUSOM, please do so in a separate sheet of paper with full name and address, or in your CV.

Selection Tests

Please be aware that you are NOT required to provide either a TOEFL, IELTS, SAT, ACT, or MCAT result or any other Equivalent Standardized Test result for enrolling at any IUSOM Worldwide Campus.

For further details see our brochure or consult our website:

<http://www.InternationalUniversity-SchoolOfMedicine.org>

Financing Medical Education

How do you plan to finance your medical education at IUSOM? Please indicate the percent of support you anticipate in each category:

____ % Loans ____ % Family/Parental Support ____ % Personal Savings ____ % Other Sources

Personal Objectives and Interests

Please provide essay-style answers to the following questions, as a separate document, adhering as strictly as possible to the number of words indicated in the parenthesis:

1. What prompted you to decide to follow the M.D. Degree Program at IUSOM? (Approximately 75 words).
2. What do you anticipate to professionally gain from the M.D. Degree Program? (Approximately 150 words).
3. What do you expect to personally gain from the M.D. Degree Program? (Approximately 150 words).
4. What are your long term goals to make use of medical skills and expertise to be acquired by attending the M.D. Degree Program at IUSOM? (Approximately 150 words).
5. What are your leisure interests and hobbies? (Approximately 75 words).

Personal Character

Have you ever been charged or convicted of a felony, misdemeanour, or other crime? Yes No
If yes, please provide explanation on a separate sheet.

What to Include with your Application Form and How to send your Information?

Materials Required

- Completed Application Form
- Curriculum Vitae in English
- Answers to the Five Essay Questions (*see page 3 of this form*)
- Photocopies of Degrees, Diplomas and Certificates and Transcripts
- Four Recent Passport-Size Photographs
- Non-Refundable Application Fee of US \$50.00 (Please send this Fee in US dollars funds payable to **International University School of Medicine** via Money Order or preferably via Wire Transfer)

All applications are dealt with on a first-come first-served basis. In order to avoid postal delays, you are welcome to send some of your information ahead via fax and e-mail given on the top of page 1 of this form.

Submitting your application information and application fee is the start of the selection process. It is not a commitment. Nevertheless, the selection procedure can only begin when IUSOM has received your non-refundable application fee of US \$50.00.

Please State Where you Saw this Institution Advertised

- Science
- Nature
- Scientific American
- The Chronicle
- C&EN
- Others

Where to Send your Application Information?

You may send to IUSOM your application information via post mail or preferably via FEDEX, UPS or DHL Courier or more preferably via emailing the downloaded fill-in version from our website using IUSOM Postal and E.-Mail addresses cited on the top of page 1 of this form.

Declaration

“I declare that the information I have given is, to the best of my knowledge, correct. I understand that any admission offered to me would be on this basis. I, as an applicant, further understand that an applicant providing IUSOM with any incorrect and misleading information will be denied admission, terminated, or dismissed and any degree awarded to such applicant will be nullified at any future time. I undertake, if admitted to IUSOM, to abide by all Rules and Regulations of IUSOM.”

Signature:

Date: