

Pathways to Practice
Post Bacc Early Assurance
Application

Biographic Information

Legal First Name:		Legal Last Name:	
Preferred First Name:			
Address:	Apt #	City, State	Zip code:
Sex:	Gender:	Preferred Pronouns:	
<p>Race/Ethnicity: (Check all that apply)</p> <p> <input type="checkbox"/> African American/ Black <input type="checkbox"/> White <input type="checkbox"/> American Indian/ Alaska Native <input type="checkbox"/> Asian/ Pacific Islander <input type="checkbox"/> Hispanic/ Latino <input type="checkbox"/> Other: </p>			
Check all that apply:		<input type="checkbox"/> I come from a disadvantaged background <input type="checkbox"/> I come from an underserved background	

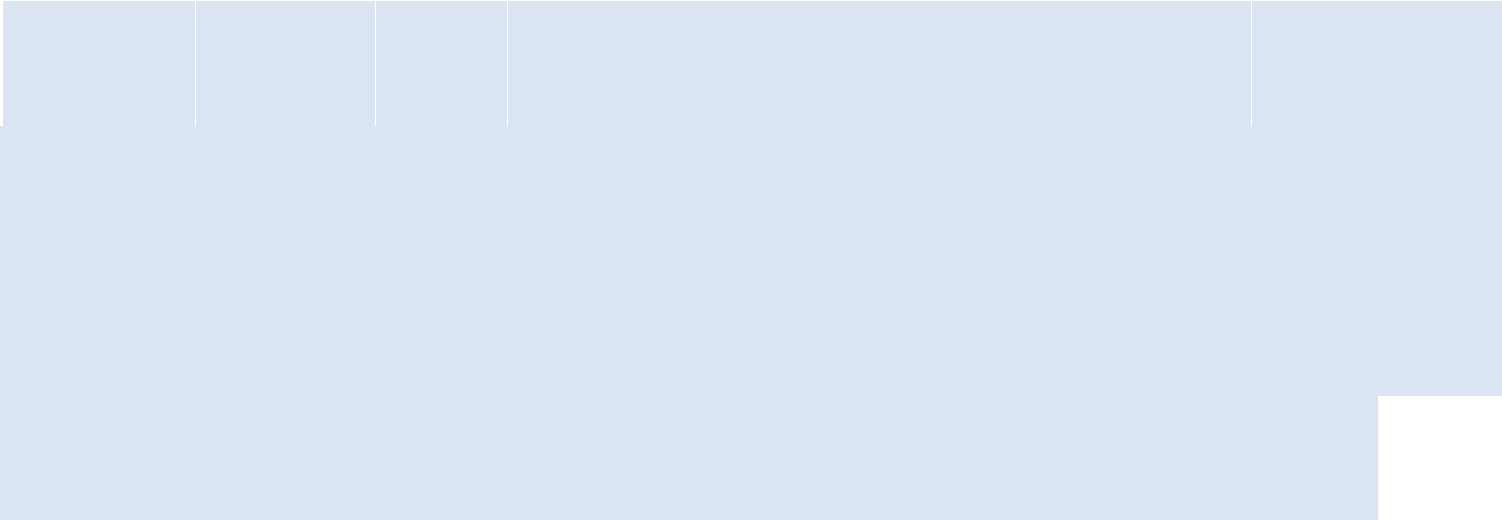
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Education History

List any/all college(s) attended including colleges attended while in high school	
Partner University	Cleveland State University
Overall cumulative college GPA:	
<p>Indicate completion and/or expected completion of the following courses: ** All courses listed must be completed by start of the 2023 fall semester</p>	<p>General Chemistry I (or equivalent)</p> <p><input type="checkbox"/> Completed when? (year only) _____ Grade received: _____</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> In Progress expected completion? (year and fall) _____</p> <hr/> <p>General Chemistry I Lab (or equivalent)</p> <p><input type="checkbox"/> Completed when? (year only) _____ Grade received: _____</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> In Progress expected completion? (year and term) _____</p> <hr/> <p>General Chemistry II (or equivalent)</p> <p><input type="checkbox"/> Completed when? (year only) _____ Grade received: _____</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> In Progress expected completion? (year and term) _____</p> <hr/> <p>General Chemistry II Lab</p>

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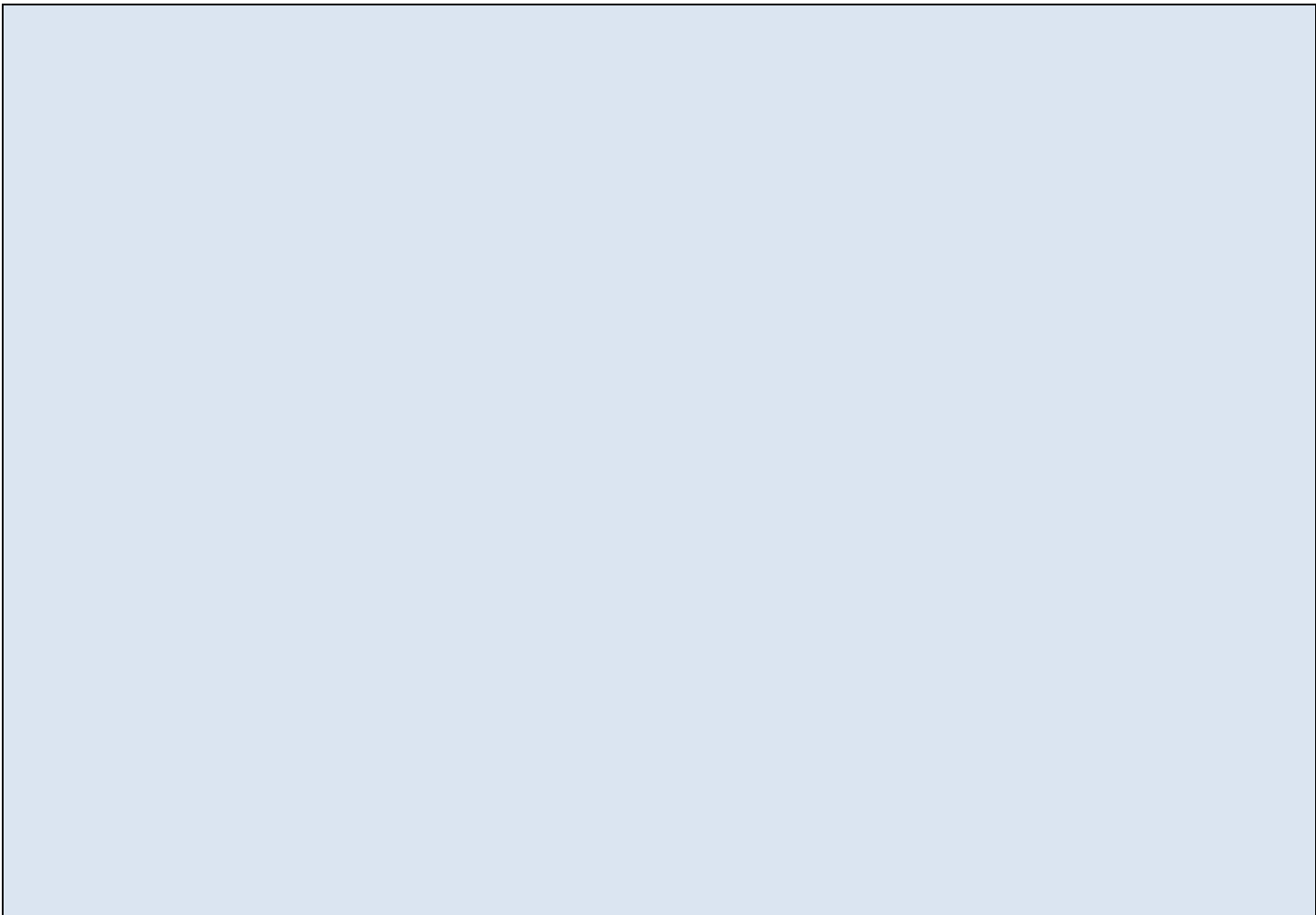


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Essay Section

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This is not an application for medical school admission. For the sake of disclosure please read the following items carefully:

- x I understand that I am requesting early assurance to the College of Medicine M.D. program at the Northeast Ohio Medical University (NEOMED). I am not applying for admission to medical school at NEOMED at this time.
- x I have read the sections in the current NEOMED Compass regarding early assurance to medical school and the NEOMED College of Medicine Essential Functions Required for Admission, C