



# PRE-HEALTH ADVISING APPLICATION

## DENTAL

### ENTERING CLASS 2018

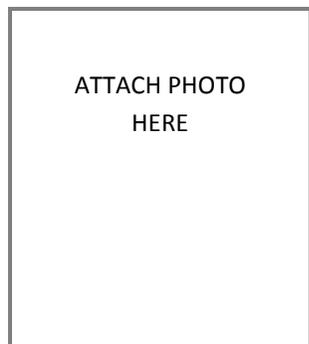
PLEASE PRINT CLEARLY!!

ATTACH A PHOTO AND CURRENT COPY OF YOUR YU TRANSCRIPT

**DEADLINE: MONDAY, JANUARY 23, 2017**

#### **APPLICANT DATA**

---



FIRST NAME: \_\_\_\_\_

LAST NAME: \_\_\_\_\_

Nickname: \_\_\_\_\_

YU ID # \_\_\_\_\_

EMAIL Address\*: \_\_\_\_\_

\*This is the email address you use most frequently. It does NOT have to be your YU email account.

CELL PHONE: \_\_\_\_\_

#### **PERSONAL BACKGROUND**

---

**Parents:** Please provide their country of origin, education levels and current occupations (grandparents also if they were a significant part of your life growing up)

**Siblings:** Please give ages and careers and where you fall (oldest, youngest, etc.)

**WHEN SUBMITTING, PLEASE BE SURE TO INCLUDE YOUR NAME ON EACH PAGE.**

**ACADEMIC BACKGROUND**

GPA calculator:

<http://www.hunter.cuny.edu/onestop/records-and-transcripts/gpa-calculator>

You must attach a CURRENT UNOFFICIAL transcript to us for each undergraduate or graduate institution in which you enrolled and completed coursework.

**UNDERGRADUATE EDUCATION:**

Please indicate information regarding your undergraduate education:

School:        \_\_\_ YC        \_\_\_ SYMS

MAJOR AND CURRENT/ESTIMATED GPA

Major: \_\_\_\_\_

Second Major (if applicable): \_\_\_\_\_

Minor: (if applicable): \_\_\_\_\_

Overall GPA: \_\_\_\_\_

Estimated Science (BCP) GPA: \_\_\_\_\_

Date Rec'd/Expected Graduation: \_\_\_\_\_

**GRADUATE EDUCATION (IF APPLICABLE)**

Regardless of where you attended or are currently attending an institution for your graduate degree or post-baccalaureate program, please complete the information below:

Degree/Certificate: \_\_\_\_\_ Date Rec'd/Expected: \_\_\_\_\_

Major: \_\_\_\_\_

CUMULATIVE GPA: \_\_\_\_\_ BCP\* GPA: \_\_\_\_\_

\*Math is listed as other science and not included in the science GPA)

Online GPA calculator:

<http://www.hunter.cuny.edu/onestop/records-and-transcripts/gpa-calculator>

Are you currently attending or did you attend a graduate degree or post-baccalaureate program following your undergraduate education? YES/No

If you attended or are currently attending a graduate degree or post-baccalaureate

program please indicate the name of that institution below:

Graduate/Post-Baccalaureate Institution:

Test    Date Taken    Scores

SAT/ACT \_\_\_\_\_

DAT Academic Science Average: \_\_\_\_\_

DAT Individual Section Scores: \_\_\_QUANT\_\_\_PAT\_\_\_READING\_\_\_ORGO\_\_\_CHEM\_\_\_BIO

Are you scheduled to take an DAT in the coming months? YES/NO

If yes, in what month are you planning?

## **ESSAYS**

---

**As part of this application you are required to write several brief essays on various topics, including your background and experiences. This is the same information required on the online applications, so focusing on these issues NOW alleviates work you will have to do when the applications open in the spring.**

**Before you attempt these essays, you should compile a professional resume and review it with the Career Services Office. They are very good at elaborating on experiences—or aspects thereof—you might not realize are important.**

### **ESSAY #1: BACKGROUND INTRODUCTION**

- ✓ Please attach a brief overview of the formative experiences in shaping who you are today as well as influences that impacted your decision to pursue a career in healthcare. Be sure to include (a) where you were born and raised, (b) your parents' or guardians' backgrounds and influences, (c) siblings, (d) experiences leading up to college that shaped your values, aspirations, and motivations concerning your future.
- ✓ Describe any activities requiring manual dexterity (e.g. activities requiring hand-eye coordination) at which you are proficient. (Three to five sentences only)
- ✓ Do you have any relatives who are dentists, in dental school, or who have studied or are studying dental hygiene, or other dental related fields? If yes, indicate name/s, school name/s, and degree and graduation year.
- ✓ Description of Residence (what was your community like growing up—urban, suburban, inner city, etc.)
- ✓ “How do I know I am I ready to become a dentist—what have I done/accomplished?”

**WHEN SUBMITTING, PLEASE BE SURE TO INCLUDE YOUR NAME ON EACH PAGE.**

Please answer completely!

## **ESSAY #2: ACADEMIC ACCOMPLISHMENTS**

**This essay should be no more than 5,000 characters. (About 1 page single-spaced)**

Please provide a general summary of your academic accomplishments and intellectual pursuits. This may include why you selected a particular major, your experience in a class or set of classes, how you diversified and pursued varied academic interests, and/or a statement to summarize your academic experience at YU.

## **NARRATIVES (2-3 SENTENCES EACH)**

---

- ✓ Awards, Honors, and Scholarships (limit 5)
- ✓ Dentistry/Shadowing Experience (limit 10)
- ✓ Extracurricular/Volunteer/Community Service (limit 10)
- ✓ Research Experience (limit 5)
- ✓ Work Experience (including Military Service) (limit 5)

## **DENTISTRY/SHADOWING EXPERIENCE (LIMIT 10)**

Write a brief narrative for each patient-related experience since high school.

## **EXTRACURRICULAR/VOLUNTEER/COMMUNITY SERVICE (LIMIT 10)**

(List all experiences post high school)

Experience Name: \_\_\_\_\_

Dates: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Average Hours Per Week \_\_\_\_\_

Contact Name and Title: \_\_\_\_\_ City/State/Country \_\_\_\_\_

SAMPLE: My fellow volunteers and I build relationships with inmates to support their rehabilitation through academic support and positive encouragement. I tutor inmates at the Baltimore City Women's Detention Center as they work toward their GEDs.

## **RESEARCH EXPERIENCE (LIMIT 5 ENTRIES)**

Though research is not required for dental students, it is a plus. Please describe any

**WHEN SUBMITTING, PLEASE BE SURE TO INCLUDE YOUR NAME ON EACH PAGE.**

research you have conducted inside or outside of YU.

Experience Name: \_\_\_\_\_

Dates (from): \_\_\_\_\_

BRIEFLY DESCRIBE RESEARCH, INCLUDING EXPECTED RESULTS AND WHETHER THEY WERE MET OR NOT.

SAMPLE: I conducted field research to understand the risk of pesticide exposure among children in agricultural communities in northern Chile. I developed and administered a survey to mothers during their children's checkups at three rural health posts.

**AWARDS, HONORS, AND SCHOLARSHIPS (LIMIT 5 ENTRIES)**

Experience Name: \_\_\_\_\_

Dates (from): \_\_\_\_\_

**WORK EXPERIENCE (INCLUDING MILITARY SERVICE) (LIMIT 5)**

Experience Name: \_\_\_\_\_

Dates (from): \_\_\_\_\_

**ADDITIONAL INFORMATION:**

Please use the space below to share information about your experiences not touched upon above. Completing this section will help you with secondary application questions! (please limit each response to ½ page)

- ✓ Challenges you have faced—personally or academically
- ✓ How will you bring diversity to your dental school class?
- ✓ Explain poor grades (if applicable)
- ✓ Provide information about gap year plans (if you have definite plans) (if applicable)
- ✓ Explain why you took the DAT more than once (if applicable)
- ✓ Time off from school (your year(s) in Israel or other semester off)