



CARBONDALE

HEALTH PREPROFESSIONS ADVISEMENT COMMITTEE

INTENT TO APPLY FOR COMMITTEE INTERVIEW

NAME _____

DAWG TAG _____

MAJOR _____ CUMULATIVE GPA _____

I AM A (CHECK ONE): JUNIOR SENIOR ALUMNUS

GRADUATION MONTH AND YEAR: _____

I AM (CHECK ONE): PRE-MEDICAL PRE-DENTAL PRE-OPTOMETRY PRE-VETERINARY

I HAVE TAKEN ____ (NUMBER) FULL-LENGTH PRACTICE EXAMS

MCAT

DAT

OAT

GRE

To qualify for a Committee Interview, a new applicant must meet the following requirements:

- Must have a cumulative GPA of at least 3.25.
• At least one-half of the prerequisite science courses must have been taken at SIU.
• The applicant must not have graduated more than four years prior to expected professional school matriculation.
• The applicant must not be seeking or have been awarded a subsequent degree (undergraduate or graduate) from another university or college.
• The applicant must secure at least two letters of recommendation from science faculty at SIU.
• The applicant must grant permission to the Health Professions Advisor (HPA) to view their entrance exam scores and application status through the relevant testing/application services.
• The applicant must meet all paperwork deadlines:
October 30: Deadline for submission of the Intent to Apply form.
December 1: Deadline for submission of the HPPA Committee Interview application packet.
January 15: Deadline for submission of supporting letters of recommendation.
February 1: Deadline for participation in a preliminary interview and submission of supplemental materials to the Health Professions Advisor.

- A. Have you ever been under investigation or found responsible for a violation of the SIU Student Conduct Code? YES NO
B. Do you consent to the release of your Disciplinary Records to the HPAC? YES NO
C. Have you ever been arrested or convicted of a felony or misdemeanor? YES NO

If yes to either A or C above, provide details of your violation(s) page two of this form. Please be aware that such a finding does not necessarily preclude you from receiving a Committee letter. Decisions are made on a case-by-case basis.

I agree that I have met and agree to all eligibility requirements.

Signature: _____ Date _____

(Typed Name is considered valid signature.)

For Office Use Only. Received _____

Please list any Conduct Code violations here. Please indicate your compliance with any sanctions against you.

Please list any arrests or civil or criminal judgements against you (misdemeanor or felony).
