



St. George's University

SCHOOL OF GRADUATE STUDIES

Grenada, West Indies

SCHOOL OF GRADUATE STUDIES APPLICATION FOR ADMISSION

Entering Term: August Term 20 _____ September Term 20 _____ (MBA in International Business only) January Term 20 _____

Business

☐ Master of Business Administration (MBA)

☐ Multi-Sector Health Management

☐ International Business

☐ Doctor of Philosophy (PhD)

☐ Management

Education

☐ Master of Education (MEd)

Medicine

☐ Master of Science (MSc)

☐ Anatomy

☐ Biochemistry

☐ Bioethics

☐ Microbiology

☐ Physiology and Neuroscience

☐ Tropical Medicine

☐ Doctor of Philosophy (PhD)

☐ Anatomy/Anatomical Education

☐ Anatomy/Anatomical Sciences

☐ Microbiology

☐ Physiology and Neuroscience

Psychology

☐ Master of Arts (MA)

☐ Clinical/Community Psychology

Public Health

Master of Public Health (MPH)

Must apply online at sophas.org

☐ Public Health Certificate Program

Veterinary Medicine

☐ Master of Science (MSc)

☐ Animal Product Processing, Entrepreneurship, and Safety

☐ Anatomical Pathology

☐ Anatomy

☐ Bacteriology

☐ Clinical Pathology

☐ Marine Medicine

☐ Parasitology

☐ Pharmacology

☐ Virology

☐ Wildlife Conservation Medicine

☐ Doctor of Philosophy (PhD)

☐ Anatomical Pathology

☐ Anatomy

☐ Bacteriology

☐ Clinical Pathology

☐ Marine Medicine

☐ Parasitology

☐ Pharmacology

☐ Virology

☐ Wildlife Conservation Medicine

I. Personal Data

Last Name (Family Name)

First Name

Middle Initial ☐ Male
☐ Female

Former Last Name (if any)

Date of Birth (month/day/year)

Age

Country of Citizenship

Country of Birth

US Visa Status (if applicable)

US Permanent Resident ☐ Yes
(Green Card Holder) ☐ No

Country of Residence

Dual Citizenship ☐ Yes
☐ No

Other Country

Mailing Address (Street Address, P.O. Box,
Floor etc.)

Mailing Address Line 2 (Apartment, Suite, Unit, Building,

City or Town

State/Province/County

ZIP Code/Postal Code

Country

Name: _____

Home Phone Number
(Country/Area/City Code)

Cell Phone Number
(Country/Area/City Code)

Email Address

Permanent address if different than mailing address:

Permanent Address (Street Address, P.O. Box)
Floor etc.)

Permanent Address Line 2 (Apartment, Suite, Unit, Building,
Floor etc.)

City or Town

State/Province/County

ZIP Code/Postal Code

Country

Are your parents/relatives graduates of St. George's University?

☐ Yes ☐ No If yes, please list first name, last name, and relationship:

Mother's Occupation

Father's Occupation

II. a. How did you learn about St. George's University? (Please be specific)

- ☐ School Advisor Name: _____
- ☐ Advertisement: ☐ Newspaper/Magazine ☐ Internet Banner
- ☐ Word of Mouth Name: _____
- ☐ SGU Affiliate ☐ SGU Graduate ☐ SGU Student ☐ SGU Faculty ☐ Visiting Professor
- ☐ Health Professional (MD, DVM, ETC.) ☐ Other _____
- ☐ Email from SGU
- ☐ Internet Search
- ☐ Social Network: ☐ Facebook ☐ Twitter ☐ Other: _____
- ☐ Campus poster ☐ College Fair/Professional Conference
- ☐ Reference Book _____ ☐ Other: _____

b. What factor(s) influenced your decision to apply to St. George's University? (Please be specific)

- ☐ Residency Placements upon graduation ☐ Clinical training network ☐ USMLE pass rates
- ☐ Large number of SGU grads in the workforce ☐ Student services ☐ Campus
- ☐ Dual degree opportunities ☐ International experience
- ☐ Other: _____

Name: _____

c. Were you contacted by phone or email after requesting information about St. George's University?

☐ Yes ☐ No If yes, please check one: ☐ Student ☐ Graduate ☐ Admission Counselor

Did this influence your decision to apply to St. George's University? ☐ Yes ☐ No

III. Personal History

1. Have you ever been convicted of a crime?

☐ Yes ☐ No If yes, Please explain:

2. Have you ever had privileges or a license (professional or otherwise) denied, suspended, and/or revoked?

☐ Yes ☐ No If yes, Please explain:

3. Have you ever been subject to a disciplinary inquiry by or before an oversight body or a licensing board?

☐ Yes ☐ No If yes, Please explain:

4. Have you ever been suspended or dismissed from an academic institution?

☐ Yes ☐ No If yes, Please explain and indicate which institution:

5. Have you ever applied to St. George's University before?

☐ Yes ☐ No If yes, when? _____

If you have previously applied, please explain how you have enhanced your application:

6. Was your schooling in English?

☐ Yes ☐ No If yes, which years? _____

Name: _____

IV. Employment, Volunteer Work, and Extracurricular Activities

You may submit a summary of work, research, and volunteer experience in a current CV or resume as an alternative to completing this section.

1. List EMPLOYMENT in the last four years, please provide hours worked per week:

Dates: _____ Hours per week: _____

Description:

Dates: _____ Hours per week: _____

Description:

Dates: _____ Hours per week: _____

Description:

2. List VOLUNTEER WORK in the last four years, please provide hours worked per week:

Dates: _____ Hours per week: _____

Description:

Dates: _____ Hours per week: _____

Description:

Dates: _____ Hours per week: _____

Name: _____

Description:

3. List all EXTRACURRICULAR ACTIVITIES:

Dates: _____ Hours per week: _____

Description:

Dates: _____ Hours per week: _____

Description:

Dates: _____ Hours per week: _____

Description:

VI. Academic Record

1. Please indicate highest level of education: _____
If you are in the process of completing a degree, please submit current transcript/academic record

2. Summary of Educational Experience: (Please list all institutions attended)

Degree/Diploma/Exam	Date Earned	Institution	Country	Grade/Mark Achieved
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Name: _____

If you have A Levels, CAPE, or IB Diploma, please list subjects:

3. Standardized Examinations

A. These standardized tests/examinations are not required for the submission of the application but should be provided if taken.

MCATs taken BEFORE April 2015

Test Date	Verbal Reasoning	Physical Sciences	Writing Sample	Biological Sciences
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

MCATs taken AFTER April 2015

Test Date	Biological and Biochemical Foundations of Living Systems	Chemical and Physical Foundations of Biological Systems	Psychological, Social, and Biological Foundations of Behavior	Critical Analysis and Reasoning Skills
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

If you are presently registered to take the MCAT, please indicate test date: _____

Graduate Management Admission Test (GMAT)

Test Date	Verbal	Quantitative	Analytical Writing
_____	_____	_____	_____
_____	_____	_____	_____

Graduate Record Examination (GRE)

Test Date	Verbal	Quantitative	Analytical
_____	_____	_____	_____
_____	_____	_____	_____

B. Test of English as a Foreign Language (TOEFL) or English Language Testing System (IELTS):
non-native speakers of English

Type of English Language Exam: IELTS, TOEFL-Paper, TOEFL-Computer, TOEFL-Internet	Test Date	Overall Score
_____	_____	_____
_____	_____	_____

Name: _____

VII. Essay

All applicants are required to complete the essay below. Candidates seeking to apply to a PhD program should speak with the Office of Admission and/or appropriate faculty regarding the requirements of a research proposal for their chosen area of study.

Personal Statement: Please provide personal information that is otherwise not included in the application and briefly explain your interest and experience in your chosen area of study. Maximum 1,500 words. (Required of all candidates.)

Note: YOUR APPLICATION WILL NOT BE REVIEWED UNLESS ALL APPLICABLE SECTIONS ARE COMPLETE.

SGU requires that you certify your application by submitting an electronic signature. To submit an electronic signature, simply type your name into the "Signature of Applicant" text field.

I hereby certify that all of the information provided on this application is true. If it is subsequently discovered that false or inaccurate information was submitted, the University may nullify a candidate's acceptance; if a student is registered, dismiss the student; or, if a degree has been conferred, rescind the degree.

Signature of Applicant: _____ Date: _____