

Georgetown Summer Medical Institute

At Georgetown University School of Medicine

Guided by the University's Jesuit tradition of *cura personalis*, of caring for the whole person, Georgetown University School of Medicine has been a leader in medical education for over 150 years, and is committed to offering excellent opportunities for academic advancement. We are pleased to offer this program for college undergraduates, post-bacc graduates, and current medical school students through the Georgetown Summer Medical Institute (GSMI).



To Apply:

To apply to Georgetown Summer Medical Institute, complete each section of the application form and submit it along with the non-refundable \$50 application fee.

Registration:

- Completed application form, transcripts and non-refundable \$50 fee must be received at the address below by June 5, 2009.
- Courses for Post-bacc and Undergrad are available on a first-come, first-served basis. You may enroll for a maximum of 5 credits.
- You will be registered in the courses for which you have applied when you receive an enrollment letter. You will also be mailed a Summer Institute bill. This bill will list the course(s) for which you have been registered, the amount due, including fees, and payment instructions.
- The bill and full payment should be mailed or brought to the Student Accounts Office by June 9th, 2009. Please note: If your payment has not been received in the Student Accounts Office by the payment deadlines, and you have not made arrangements to defer payment, you will be dropped from the courses for which you were registered.
- If you have not received an enrollment letter by two weeks prior to the beginning of classes, contact the GSMI Office of Admissions at 202-687-1733.
- Classes begin Monday, June 22, 2009
- Georgetown University School of Medicine reserves the right to pursue any questions regarding academic records/transcripts, or issues of concern raised during the application process.
- An official transcript must be sent to the GSMI - Office of Admissions for your application to be processed. **YOU WILL NOT BE REGISTERED UNTIL YOUR TRANSCRIPT IS RECEIVED.** Note: Official transcripts cannot come from an applicant.

Mail your completed application to:

For US Mail (including Express):

GSMI – Office of Admissions
Georgetown University School of Medicine
Box 571421
Washington, DC 20057-1421

For Courier (UPS, FedEx, DHL, etc.):

GSMI - Office of Admissions
Georgetown University School of Medicine
3900 Reservoir Road, NW – Room NE 108
Washington, DC 20007

GSMI Courses

For Post-Bacc and Undergraduate Applicants:

<u>Course Name</u>	<u>Course Number</u>	<u>Credits</u>	<u>Tuition</u>	<u>Dates</u>
Human Gross Anatomy	4210 056 01	5	\$3,750	June 22-July 31
Medical Biochemistry	4220 050 01	4	\$3,000	June 22-July 17
Human Physiology	4235 051 01	5	\$3,750	June 22-July 31
Histology	4210 056 01	4	\$3,000	June 22-July 17
Physician in Society	4105 050 01	0	\$0**	June 22-July 31
Medical Admissions Workshops	4105 051 01	0	\$0**	June 22-July 31

**These classes are free for those enrolled in any credit-bearing course. Otherwise, they are \$750 each.

For Remedial and Make-up Applicants:

<u>Course Name</u>	<u>Course Number</u>	<u>Credits</u>	<u>Tuition</u>	<u>Dates</u>
Human Gross Anatomy	4210 056 01	5	\$3,750	June 22-July 31
Medical Biochemistry	4220 050 01	4	\$3,000	June 22-July 17
Human Physiology	4235 051 01	5	\$3,750	June 22-July 31
Histology	4210 056 01	4	\$3,000	June 22-July 17
Integrated Cardiopulmonary Science	GSMI 514 01	5	\$3,750	June 22-July 31
Integrated Cardiovascular Science	GSMI 510 01	3	\$2,250	June 22-July 31
Integrated Pulmonary Science	GSMI 512 01	3	\$2,250	June 22-July 31

Full course descriptions are available online at <http://gsmi.georgetown.edu/>. Please read the description carefully to ensure that the course you choose is the right one for your needs.

Georgetown Summer Medical Institute Summer 2009 Application

This is a Microsoft Word form. Place your cursor in the shaded box to type in the information. Please type or print with dark ink. Follow all directions carefully.

PART I

First Name _____ MI _____ Last Name _____

GU I.D. No./SSN. _____ Date of Birth: _____ Sex: male female

Permanent Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Permanent Phone: _____ Current Phone: _____

Current Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Email: _____

Check One: I will be living at my current address until _____

I live at my permanent address.

Citizenship: US Other Country: _____

U.S. Permanent Resident: Country of Citizenship: _____

Current Program: B.S. M.S. M.D. Ph.D. D.D.S. Other: _____

School attending/ last attended: _____

Dates: _____ Year of Graduation: _____ Degree: _____ Major: _____

If you are a current GU student, check here:

Have you ever been suspended or dismissed from GU or any school for any reason? Yes No

If "Yes", have you been readmitted? Yes No

PART II – COURSE REGISTRATION

Course #: _____ Course Name: _____ Remedial?

Optional zero-credit courses (non-remedial students only): Physicians in Society
 Medical Admissions Workshop

PART III - GEORGETOWN STUDENTS ONLY:

Have this portion signed by your Dean or (where appropriate) Advisor.
This student has been granted approval to take the courses listed on this application.

Signature: _____ Date: _____

PART IV – NON-GEORGETOWN STUDENTS: All applicants currently enrolled in an educational program must complete this section:

Please have the appropriate official at your institution complete this section.

This is to certify that the student named in this application:

- a. is in good standing at this institution.
- b. **has** **has not** been granted approval for transfer of the courses listed in this application to the home institution (medical students will not be admitted for remediation/make-up without this approval).

Signature: _____ Date: _____
()Dean () Registrar ()Advisor () Professor ()Dept. Chair

Printed Name: _____ Institution: _____

PART V – INTERNATIONAL STUDENTS:

1. Submit a copy of your international passport.
2. Upon enrollment, the registrar’s office will send you a GSMI International Student Visa Status Questionnaire
3. Accurate citizenship and visa-type information must be submitted in a timely fashion. Late applicants will be ineligible to register.