

**THE JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE**

Application for Admission to GRADUATE STUDY leading to the Ph.D. degree



Please indicate with an "x" the program(s) to which you are applying	
Biochemistry, Cellular & Molecular Biology	Human Genetics & Molecular Biology
Biological Chemistry	Immunology
Biomedical Engineering	Neuroscience
Cellular & Molecular Medicine	Pathobiology
Cellular & Molecular Physiology	Pharmacology & Molecular Sciences
Functional Anatomy & Evolution	Program in Molecular Biophysics
History of Medicine	
Applied Health Sciences Informatics (MS)	Medical & Biological Illustration (MA)
Health Sciences Informatics (MS)	Post Baccalaureate Certificate in Clinical Informatics

**BIOGRAPHICAL INFORMATION**

Full Name: Last Name (family)		First Name		Middle Name	
Present Address: No.	Street	City	State/Country	Zip Code	Use Until
Permanent Address: No.	Street	City	State/Country	Zip Code	
Present Telephone - U.S.			Present Telephone -International		
Cell Phone Number			E-mail Address		
Name of Parent, Guardian, or Emergency Contact: Relationship to Applicant					
Address of Parent, Guardian, or Emergency Contact: Phone No. (if available)					
Applicant Date of Birth		Applicant Place of Birth: City/State/Country (list County also if in Maryland)			
Are you a U. S. Citizen?		If not, indicate Country of Citizenship			
Visa Status	F-1	J-1	U.S. Permanent Resident	Other	Expiration Date

**TEST SCORES - REPORT OFFICIAL GRE/TOEFL/PPI SCORES TO- INSTITUTION CODE 5316 - PhD MEDICINE**

If English is not your native language, the Test of English as a Foreign Language (TOEFL) or IELTS official test scores are required. If taken, list TOEFL total score: Paper Based: Internet-Based: TOEFL Registration Number:					
Date Taken or expected:	IELTS total:	Have you received a degree from a U.S. Institution?		Yes	No
Have you taken or do you plan to take the general Graduate Record Exam? Yes No			Date taken or expected: _____		
Registration Number: _____			If taken, list scores below:		
Verbal	V%	Est. Current Score	Quant.	Q%	Est. Current Score
Analy.	Analy. %	Analy. Writing	AW%		
Have you taken or do you plan to take the subject Graduate Record Exam? Yes No			Date taken or expected: _____		
If taken, list score: Subject Test Name		Subject Test Score		Subject %	
Registration Number: _____					
MCAT Scores: Date taken or expected	Verbal	PhysSci	Writing	BiolSciences	Total Score
Indicate foreign language(s) you can read and level of proficiency: (Requirement for History of Medicine)					

**ACADEMIC HISTORY - List Bachelor's degree first, Master's next (if applicable)**

Name of Institution	Dates of Attendance	Degree	Date/Expected	Major Field	GPA/Scale
	From To				
	From To				
	From To				
Have you ever discontinued attendance or been dismissed from any school or college? Yes No					
Have you ever been subject to disciplinary action or placed on probation by a college or university? Yes No					
If answer is yes to above questions, please provide details (attach additional sheet if necessary).					
List honors you have received, such as scholarships, fellowships, election to honor societies, etc. (attach additional sheet if necessary).					

**JHU AFFILIATION**

Are you currently enrolled in a degree program at Johns Hopkins University? \_\_\_Yes \_\_\_No

Are you currently an employee of Johns Hopkins? \_\_\_Yes \_\_\_No

Have you previously applied to the Johns Hopkins University School of Medicine graduate programs? \_\_\_Yes \_\_\_No

If yes, list information and dates:

**AREA OF CONCENTRATION:** Indicate, if known, your special area of concentration within the program to which you are applying (required of applicants to the Biomedical Engineering, Immunology, and Pathobiology programs):

**PERSONAL STATEMENT:** Please attach a typewritten statement (one page maximum) indicating the basis of your interest in graduate study and your career objectives. Please include a discussion of any research experience you have had.

**LETTERS OF RECOMMENDATION:** List the names and addresses of those who will submit letters of recommendation for you (see General Instruction Sheets)

Name	Address
Name	Address
Name	Address

**FINANCIAL AID :** To support their educational expenses (tuition and stipend), the School of Medicine encourages all applicants to apply for graduate fellowships from appropriate U.S. and international agencies. If you have obtained such funding, please indicate source and amount below. You will be required to disclose such external support at the time of matriculation.

a) I have applied for external support \_\_\_Yes \_\_\_No

b) I have received external support \_\_\_Yes \_\_\_No

Source \_\_\_\_\_ Amount \_\_\_\_\_

If accepted to a Ph.D. program, applicants unable to obtain external support will be considered for financial aid in the form of a tuition scholarship, health insurance, and a stipend to cover living expenses. The stipend for the 2011-2012 academic year is \$28,083 (unless otherwise noted\*). The tuition is \$42,600.

\*Applicants accepted to the Medical and Biological Illustration, History of Medicine, Applied Health Sciences Informatics, Health Science Informatics, and the Post Baccalaureate Certificate in Clinical Informatics programs should contact the programs directly for specific information regarding funding.

\*International applicants please note - most financial assistance provided by the School of Medicine is federal financial assistance available only to U.S. citizens and permanent residents. International applicants who are not U.S. citizens or permanent residents are *not* eligible for U.S. government funding. For this reason, we strongly advise international students to apply for external funding.

**BACKGROUND CHECKS:** It is the policy of the Johns Hopkins University School of Medicine that all incoming members to the community, including faculty, students, and staff, must undergo criminal background checks. As a result, applicants admitted to a graduate program will undergo a criminal background check prior to matriculation. In the event of an unsatisfactory finding, the School of Medicine may withdraw its offer of admission. If you wish to disclose any offense that may be revealed by this procedure, we invite you to do so at this time on a separate attachment.

I affirm that the information on this application form, and any additional information that I submit related to the admissions process, is complete, accurate, and true to the best of my knowledge and contains no significant omissions. I understand that providing false statements or omitting material information on any part of this application may be cause for denial of admission, cancellation of registration, expulsion from the University, or revocation of a degree.

No student will be allowed to matriculate until the School of Medicine has received proof of graduation and an official transcript from an accredited undergraduate program.

If I am admitted to study at the Johns Hopkins University, I agree that I will honor the University's academic and ethical standards and that I will abide by all requirements established by the University concerning academic progress, health and conduct. I agree that the University may dismiss any student whose academic standing is unacceptable or whose general conduct jeopardizes the community or is otherwise unacceptable.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

*To be completed only by the Degree Program or Committee*

I approve the admission of the above named as a student in the Program of \_\_\_\_\_ and recommend acceptance.

Date \_\_\_\_\_ Signature \_\_\_\_\_

# THE JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE

## PERSONAL DATA SHEET – GRADUATE PROGRAMS

The following questions are *optional*, and all information is confidential. Our graduate programs are primarily funded by NIH research training grants that require us to report this statistical data. This information will not be used in making any admission decision.

The Johns Hopkins University School of Medicine actively supports diversity in our graduate programs:

[http://www.jhu.edu/news\\_info/policy/diversity.html](http://www.jhu.edu/news_info/policy/diversity.html). We strongly encourage applications from talented individuals from:

1) Underrepresented racial and ethnic groups; 2) Individuals with disabilities; and 3) Individuals from economically, socially, culturally, or educationally disadvantaged backgrounds. You may choose to self-identify as a member of one of these underrepresented groups in the biomedical sciences. If you have questions about your status as a member of one of these groups we recommend that you review section A.3 of the following NIH website: [http://grants.nih.gov/training/faq\\_diversity.htm#top](http://grants.nih.gov/training/faq_diversity.htm#top)

Gender:  Male  Female

Please indicate the group(s) listed below to which you belong:  
 Hispanic or Latino  Not Hispanic or Latino

From the choices listed below, please indicate your racial/ethnic self-description (you may choose more than one):

- |   |  |
|---|--|
| <input type="checkbox"/> = Mexican American or Chicano      | <input type="checkbox"/> = Chinese                                 |
| <input type="checkbox"/> = Puerto Rican (Mainland)          | <input type="checkbox"/> = Japanese                                |
| <input type="checkbox"/> = Puerto Rican (Commonwealth)      | <input type="checkbox"/> = Korean                                  |
| <input type="checkbox"/> = Hispanic/Other (including Cuban) | <input type="checkbox"/> = Other Asian                             |
| <input type="checkbox"/> = Native American                  | <input type="checkbox"/> = Southeast Asian (other than Vietnamese) |
| <input type="checkbox"/> = Alaskan Native                   | <input type="checkbox"/> = Vietnamese                              |
| <input type="checkbox"/> = Native Hawaiian                  | <input type="checkbox"/> = Other Pacific Islander                  |
| <input type="checkbox"/> = Black/African American           | <input type="checkbox"/> = Filipino                                |
| <input type="checkbox"/> = White/Caucasian                  | <input type="checkbox"/> = Indian or Pakistani                     |

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Do you have a disability?  Yes  No  Learning  Hearing  Visual  Mobility \_\_\_\_\_ Other

If you need information on disability services please contact the Office of Graduate Student Affairs at 410-614-3385 or [gradsoff@jhmi.edu](mailto:gradsoff@jhmi.edu)

The income guidelines to qualify for disadvantaged background is 200% of the poverty level listed at: <http://aspe.hhs.gov/poverty/09poverty.shtml>

Based on these guidelines, do you qualify for disadvantaged background status?  Yes  No

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Are you, or have you been, a participant in one of the following programs?

- |   |   |
|---|---|
| <input type="checkbox"/> Project 1000   | <input type="checkbox"/> Leadership Alliance Summer Research Early Identification Program |
| <input type="checkbox"/> Meyerhoff Scholarship Program                        | <input type="checkbox"/> NIGMS Post-Baccalaureate Research Education Program              |
| <input type="checkbox"/> Minority Access Research Careers                     | <input type="checkbox"/> Minority Biomedical Research Support Program (RISE)              |
| <input type="checkbox"/> Ronald McNair Post-Baccalaureate Achievement Program |   |

Have you been a participant of an undergraduate Summer Research opportunity at Johns Hopkins?  Yes  No  
If yes, please select the division of JHU below:

- |   |  |
|---|--|
| <input type="checkbox"/> Krieger School of Arts & Sciences (KSAS) | <input type="checkbox"/> Whiting School of Engineering (WSE)                   |
| <input type="checkbox"/> School of Medicine                       | <input type="checkbox"/> Nitze School of Advanced International Studies (SAIS) |
| <input type="checkbox"/> Bloomberg School of Public Health        | <input type="checkbox"/> School of Nursing                                     |
| <input type="checkbox"/> School of Education                      | <input type="checkbox"/> Carey Business School                                 |
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How did you hear about our graduate programs?  Alumni  Internet  Student  Printed Material  
 Recruitment meeting  Undergraduate Advisor \_\_\_\_\_ Other

**THE JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE**  
**General Instructions**

**ADMISSION REQUIREMENTS:** Requirements specific to each program are noted in The Johns Hopkins University School of Medicine Catalog and the graduate program website: <http://www.hopkinsmedicine.org/graduateprograms>. Unanswered questions can be resolved by contacting the program to which you are applying (see graduate program website for contact information).

**TRANSFERS:** Applicants desiring to transfer from another school must be in good standing at the school previously attended.

**FINANCIAL AID:** The Office of Financial Aid only provides assistance with U.S. government sources of funding which is available only to U.S. citizens and permanent residents. Inquiries concerning financial aid may be sent to: The Johns Hopkins University School of Medicine, Student Financial Aid Services, Reed Hall, 1620 McElderry St., Suite 427, Baltimore, MD 21205-1911, or telephone (410) 614-3450. E-mail: [finaid@jhmi.edu](mailto:finaid@jhmi.edu)

**DEADLINE FOR APPLICATIONS:** Applications and supporting documents must be submitted by the dates listed below:

<b>December 1</b>	Neuroscience
<b>December 5</b>	Biochemistry, Cellular and Molecular Biology
<b>December 8</b>	Cellular and Molecular Medicine Immunology
<b>December 15</b>	Biomedical Engineering
<b>January 1</b>	Human Genetics and Molecular Biology Program in Molecular Biophysics
<b>January 10</b>	Biological Chemistry Cellular and Molecular Physiology Functional Anatomy and Evolution Pathobiology Pharmacology and Molecular Sciences
<b>January 15</b>	History of Medicine
<b>February 1</b>	Applied Health Sciences Informatics Health Sciences Informatics (supporting materials due 2/15) Post Baccalaureate Certificate in Clinical Informatics
<b>February 21</b>	Medical and Biological Illustration – (Art Portfolios and Applicant Profiles due January 15)

**APPLICATION FEES:** Application fees are non-refundable, and receipt is required before an application can be processed. The fee schedule is indicated below. You must pay the fee by credit card at the time of application. Paper applications are available upon request. Please be advised not all programs accept paper applications and the fees are higher than the online application. You may contact the Office of Graduate Student Affairs for the paper application and fee schedule: [gradsoff@jhmi.edu](mailto:gradsoff@jhmi.edu)

\$ 50.00	Johns Hopkins University students (currently enrolled in a degree program) and current JHU employees <i>only</i>
\$ 50.00	Post Baccalaureate Certificate in Clinical Informatics
\$100.00	1 program
\$110.00	2-3 programs
\$150.00	4 or more programs

**ADDITIONAL INSTRUCTIONS FOR INTERNATIONAL APPLICANTS TO THE PROGRAM IN MOLECULAR BIOPHYSICS:**

Students in the Program in Molecular Biophysics are supported for the first two years by a training grant from the National Institutes of Health, and this support is limited to U.S. citizens and permanent residents. For this reason, international applicants must demonstrate financial support for their studies and must deposit funds covering the first two years of tuition and living expenses with the University prior to April 15. If the funds are not deposited in a timely manner, any offer of admission to the Program in Molecular Biophysics will be null and void. In addition, all international applicants to the Program in Molecular Biophysics graduate program must submit the Biophysics Supplementary Application Form for Non-U.S. Citizens and Non-U.S. Permanent Residents by the admissions deadline. Applications from non-U.S. citizens and non-U.S. permanent residents that do not include the Supplementary Application Form will not be considered. Download the form at: <http://www.grad.jhu.edu/admissions/apply/#biophysics>

The Johns Hopkins University does not discriminate on the basis of race, color, gender, religion, age, sexual orientation, national or ethnic origin, disability, marital status or veteran status in any student program or activity administered by the University, or with regard to admission or employment. Defense Department policies regarding sexual orientation in ROTC programs conflict with this University policy. The University continues its ROTC program, but encourages a change in the Defense Department policy. Questions regarding Title VI, Title IX and Section 504 should be referred to the Office of Institutional Equity, Garland Hall 130, Telephone: (410) 516-8075, (TTY): (410) 516-6225.

**JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE**  
**General Instructions (continued)**

**SUPPLEMENTAL MATERIALS:** Direct supplemental application materials to:

**Johns Hopkins University School of Medicine**  
**Office of Graduate Student Affairs**  
**1830 E. Monument Street, Suite 2-107**  
**Baltimore, MD 21287**

If you are applying to **more than one** program, only **one** complete set of supporting materials is required.

Supplemental application materials for the **Program in Molecular Biophysics** should be directed to:

**Program in Molecular Biophysics**, Johns Hopkins University, 3400 N. Charles St., Jenkins Hall, Baltimore, MD 21218

If you are applying to **more than one** program, including the Program in Molecular Biophysics, send **one** complete set of supporting materials to the Office of Graduate Student Affairs.

**SAMPLES OF WORK:** Several programs require an applicant to submit a sample of work: **History of Medicine** requires a thesis, publication, writing sample, or term paper. **Medical & Biological Illustration** requires an Art Portfolio and Applicant Profile. Send the samples of work directly to the program address listed below, and direct supplemental materials to the Office of Graduate Student Affairs.

**History of Medicine**, Johns Hopkins University School of Medicine, Dept. of History, 1900 E. Monument St., Baltimore, MD 21205

**Medical & Biological Illustration**, Johns Hopkins University School of Medicine, 1830 E. Monument St., Suite 7000, Baltimore, MD 21287

**TRANSCRIPTS:** Official transcripts of certified records of *all* university (undergraduate and graduate) study must be submitted. **Please have your official transcript sent directly from your previous institution to Johns Hopkins University School of Medicine. Transcripts must be received in a sealed university envelope to be considered official.** If you have attended more than one institution, transcripts from each must be received. If information on your current courses is not included in your transcript, please send a list of your current courses, and courses to be taken before beginning graduate study. Official transcripts for current courses can be sent when they become available. Please note - transcripts are not returnable.

**LETTERS OF RECOMMENDATION:** Please request letters of recommendation from faculty members or other professionals who are acquainted with you and your academic work. These letters should comment on your aptitude and promise for independent research. See the list below for the number of letters required by each program. Letters of recommendation should be submitted through the online recommendation system. When letters are submitted online it is not necessary to send a hard copy. Applicants to the **Medical and Biological Illustration** program must obtain a letter from faculty members in both Science and Art.

Graduate Programs	Letters	Graduate Programs	Letters
Biochemistry, Cellular & Molecular Biology	3	Human Genetics & Molecular Biology	2
Biological Chemistry	2	Immunology	3
Biomedical Engineering	3	Neuroscience	2
Cellular & Molecular Medicine	3	Pathobiology	3
Cellular & Molecular Physiology	3	Pharmacology	3
Functional Anatomy & Evolution	3	Program in Molecular Biophysics	3
History of Medicine	3		
Applied Health Sciences Informatics (MS)	3	Medical & Biological Illustration (MA)	3
Health Sciences Informatics (MS)	3	Post Baccalaureate Certificate in Clinical Informatics	2

**GRADUATE RECORD EXAMINATION AND TEST OF ENGLISH AS A FOREIGN LANGUAGE: INSTITUTION CODE 5316**

Applicants should request the results of the GRE and TOEFL test be sent directly to **Johns Hopkins University PhD Medicine 5316**. No Department Code is necessary. **You must take the GRE/TOEFL in sufficient time for the score reports to reach us by the application deadline.** Scores reported to the wrong Institution Code may result in your application status being considered incomplete.

TOEFL or IELTS scores are required for international students. The TOEFL requirement is waived if you have completed your degree (or are currently enrolled in a degree program) at a university within the U.S.

You may submit your application without test scores and we will match the official score report to your file when it becomes available. Our programs **do not** require the GRE Subject test but applicants are encouraged to submit scores.

**The Applied Health Sciences Informatics, Health Sciences Informatics, and Certificate in Clinical Informatics** programs have specific requirements for the GRE. Please review the program websites for a complete list of requirements.

**ETS Personal Potential Index** reports are not required. If you choose to send them please direct the reports to **Institution Code 5316**.

**Medical College Admissions Test:** MCAT scores are not required. Some programs will accept the MCAT in place of the GRE; please contact them directly to inquire. Contact information is available on the graduate program website: [www.hopkinsmedicine.org/graduateprograms](http://www.hopkinsmedicine.org/graduateprograms). If you plan to submit MCAT scores, please send a copy of the official results, including verification code, to the Johns Hopkins University, Office of Graduate Student Affairs.