



# A. C. MOSLEY PRE-MED PROGRAM APPLICATION 2018 – 2019



The Mosley High School Pre-Med Program is an exciting opportunity for learning and development as you pursue your medical career. Throughout your tenure in the Pre-Med Program, you will have the privilege to attend in-school medical lectures, visit hospitals, and rotate through various medical clinics, and compete in HOSA (Future Health Professionals) for awards & scholarships.

Our program is unique and will add great value to students who have the desire to work in any area of the health care profession, including, but not limited to Medicine, Nursing, Physical Therapy, Dentistry, Psychology, Veterinarian, and LPN. This program is designed to focus on teaching the sciences and skills that will prepare students for undergraduate medical programs and all other health care programs.

Mosley High School's Pre-Med Program is one-of-a-kind. Not only do we have a physician directing the program, but also our students will have the opportunity to visit and intern in various clinics and hospitals in the county and abroad. They will also be able to shadow and rotate with physicians and health care professionals in their interested subject area. Mosley High School has partnered with medical facilities along with health care programs in Florida to provide a hands-on experience.

Please keep in mind, that Pre-Med students must maintain strong academic integrity. One of the basic requirements is that you maintain a 3.0 or above grade point average throughout your tenure in the Pre-Med Program. Focused, incoming freshmen will automatically be accepted into the program and will be re-evaluated at the end of their freshman year to ensure they have maintained a 3.0 GPA. Enrollment in MAPPS is not required but highly recommended for students with a 3.0 GPA or higher.

**PLEASE PRINT:**

**DATE OF APPLICATION:** \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Incoming School Grade (Please Circle One):      Freshman              Sophomore              Junior              Senior

(Sophomores, Juniors & Seniors) Were you in the Pre-Med Program Last School Year?    Yes \_\_\_\_\_    No \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Current G.P.A. \_\_\_\_\_

Student's Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Student's Cell Phone: (\_\_\_\_) \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Emergency Phone: (\_\_\_\_) \_\_\_\_\_

Which medical field(s) are you interested in? \_\_\_\_\_

Parent's Name (Mother): \_\_\_\_\_ Parent's Mobile Phone (Mother): \_\_\_\_\_

Parent's Email Address (Mother): \_\_\_\_\_

Parent's Profession/Career (Mother): \_\_\_\_\_

Parent's Name (Father): \_\_\_\_\_ Parent's Mobile Phone (Father): \_\_\_\_\_

Parent's Email Address (Father): \_\_\_\_\_

Parent's Profession/Career (Father): \_\_\_\_\_