

About the Early Assurance Program at Upstate Medical University

The Early Assurance Program at SUNY Upstate Medical University's College of Medicine accepts applications from college sophomores who intend to go to medical school after graduation. This program offers a guaranteed acceptance into medical school and allows qualified students to continue their undergraduate studies without the pressures associated with medical school preparation and application. Students in the Early Assurance Program begin their studies at SUNY Upstate's College of Medicine in the fall following their graduation from college.

Admission Requirements

Applicants to the Early Assurance Program must have a minimum grade point average of 3.50, a recommended SAT score of 1300 (Math and Critical Reading Section only) or ACT score of 29, and a high level of academic performance. The MCAT (Medical College Admission Test) is not required.

Applicants also must have completed three of the required science course sequences (see Early Assurance Program Requirements below). A highly satisfactory performance in these courses must be documented through excellent grades as well as instructor and pre-health committee recommendations.

Applicants are required to submit a personal statement (Question #26) on the advantages of participating in this program and to provide an outline of their educational goals and objectives for their remaining two college years (Question #25).

Maintaining Eligibility

Students enrolled in the Early Assurance Program are expected to carry normal course loads during their junior and senior years of college, in addition to any outstanding medical school admissions requirements. It is understood that early acceptance to the SUNY Upstate College of Medicine carries with it the student's commitment to vigorously pursue a field (or fields) of study in depth. Furthermore, the Early Assurance Program requires relevant volunteer work, a 3.50 overall grade point average with no medical school prerequisite course grade below a "B", satisfactory academic progress consistent with past performance, and adhering to institutional codes of conduct. Students who graduate early from their undergraduate program will not be allowed to enroll any earlier at SUNY Upstate; they must enroll in the year to which they were initially accepted.

Early Assurance Program Admission Requirements

1. A minimum 3.50 grade point average.
2. Completion of three of the four required science course sequences:
 - Biology with lab (6-8 credits)
 - Physics with lab (6-8 credits)
 - General chemistry with lab (6-8 credits)
 - Organic chemistry with lab (6-8 credits)
3. Sophomore status at your undergraduate institution.
4. A letter of recommendation from your college Health Professions Advisory Committee.
5. A copy of your SAT or ACT score report. (Preference given to students with combined SAT scores of 1300 or higher, or an ACT score of 29 or higher.)
6. A personal statement (on page three of this application form — Question #26).
7. An official transcript of four semesters of completed college coursework.
8. An official high school transcript.
9. An application fee of \$100, payable to SUNY Upstate Medical University.

The State University of New York Upstate Medical University does not discriminate on the basis of race, religion, sex, sexual orientation, color, age, national origin, disability, marital status, or veteran status, in the recruitment and employment of faculty, staff, or students, or in the operation of any of its programs or activities, as specified by the federal and state laws and regulations.

College of Medicine • Office of Student Admissions

766 Irving Avenue • Syracuse, New York 13210 • (315) 464-4570 • (800) 736-2171 • admiss@upstate.edu

www.upstate.edu



State University of New York

Upstate Medical University

State University of New York Upstate Medical University

College of Medicine



Submit your completed application to:

Office of Student Admissions
SUNY Upstate Medical University
766 Irving Avenue
Syracuse, New York 13210
315-464-4570

Early Assurance Program Application

Entering Year for College of Medicine _____

\$100 Application Fee Enclosed? Yes No

(Two years from time of application)

PLEASE TYPE OR PRINT LEGIBLY

1. Social Security Number _ _ _ - _ - _

2. Sex Female Male

3. Name in Full _____
LAST FIRST MIDDLE

4. Permanent Address _____

Street _____ Apt No. _____

City _____ State _____ Zip Code _____

Telephone (_____) _____ E-mail Address _____
AREA CODE NUMBER

Cell phone (_____) _____ Date of Birth _____
AREA CODE NUMBER

5. Mailing Address (if different) _____

Street _____ Apt No. _____

City _____ State _____ Zip Code _____

Telephone (_____) _____
AREA CODE NUMBER

6. Citizenship U.S. Citizen Permanent Resident Other (specify visa category) _____

7. If you wish to identify yourself as a member of an ethnic/racial group, please indicate:

African American, not of Latino origin Latino, not of Puerto Rican origin White, not of Latino origin Mexican
 Native American/Alaskan Native Asian/Pacific Islander Puerto Rican Other: _____
(specify)

8. College currently attending _____ **Year of Graduation** _____

Address _____

City _____ State _____ Zip Code _____

9. Has your education been continuous other than for vacations? Yes No

If no, indicate non-educational experience: _____

10. Were you required to leave any college or denied re-admission because of conduct or scholarship deficiencies? Yes No

If yes, explain: _____

11. Have you had any military experience? Yes No

Branch _____ Highest Rank _____ Entry Date _____ Discharge Date _____

12. Except for minor traffic violations, have you ever been convicted of any violation of the law? Yes No

Explain _____

13. List any academic awards:

14. List Employment (Type of work, hours per week, dates):

15. Have you met the premedical course requirements? Yes No

Please list the equivalent courses and the grades that you received. If not yet completed, please indicate expected date of completion.

Biology I and II with lab _____

General Chemistry I and II with lab _____

Organic Chemistry I and II with lab _____

Physics I and II with lab _____

16. List extracurricular activities: (Please include dates and number of hours per week.)

17. List volunteer and/or community activities: (Please include dates and number of hours per week.)

18. List all clinical and/or research activities and experiences: (Please include dates and number of hours per week.)

