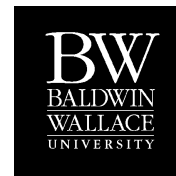


BALDWIN WALLACE UNIVERSITY
Physician Assistant Program – Master of Medical Science (MMS)
Application Supplement Form



To submit completed form: save and email to paprogram@bw.edu, or print and fax to (440) 826-3830.

(If you are using a Mac, please complete this form in Adobe Acrobat Reader and not Preview.

If you don't have the Acrobat Reader, you can download it at [https://get.adobe.com/reader/.](https://get.adobe.com/reader/))

This form will be reviewed upon verifying that Shadowing Form/s have also been submitted as required.

Last Name _____ First Name _____

Preferred Mailing Address _____ Email _____

PREREQUISITES

Candidates for the PA Program must complete all approved prerequisite courses as listed below. Please indicate when you completed these courses, plan to complete, or enroll in them. Courses in a I & II sequence reflect semester courses, or a full year of that subject. If courses were taken as quarter credits, then three courses (i.e., a full year sequence) are required. For any courses retaken, include information for both enrollments.

Prerequisite Course	Type of Course	Course Number (e.g., ENG 100)	Term/Year (e.g., FA17, SP18)	University / College	Grade Earned
English Composition					
Statistics					
General Psychology					
General Biology I with lab	Lecture OR Lecture & Lab				
	Lab (if separate course number)				
General Biology II with lab	Lecture OR Lecture & Lab				
	Lab (if separate course number)				
General Chemistry I with lab	Lecture OR Lecture & Lab				
	Lab (if separate course number)				
General Chemistry II with lab	Lecture OR Lecture & Lab				
	Lab (if separate course number)				
Organic Chemistry with lab	Lecture OR Lecture & Lab				
	Lab (if separate course number)				
Microbiology with lab	Lecture OR Lecture & Lab				
	Lab (if separate course number)				
Anatomy & Physiology I with lab OR Anatomy w/ lab*	Lecture OR Lecture & Lab				
	Lab (if separate course number)				
Anatomy & Physiology II with lab OR Physiology w/ lab*	Lecture OR Lecture & Lab				
	Lab (if separate course number)				
Medical Terminology					

*One full semester of human anatomy with lab and one full semester of human physiology with lab can replace the anatomy and physiology combined courses.

FOR ALL PREREQUISITE COURSEWORK - COMPLETED, IN PROGRESS, AND PLANNED

Were all courses and labs taken in traditional, in-person format? Yes No

If No, please list the course/s and a brief description of the format (i.e., hybrid, on-line, etc.); include the course number/s shown on the previous page of this form:

DEGREE(S) EARNED / TO BE EARNED

University / College	Degree	Major	Date

ENROLLMENT INFORMATION

1. Have you previously applied to Baldwin Wallace University? No Yes, Dates _____
2. Do you plan to apply for financial aid (FAFSA)? No Yes

BACKGROUND INFORMATION

1. Have you ever been found responsible for a disciplinary violation at any college you have attended, whether related to academic or behavioral misconduct that resulted in your probation, suspension, removal, dismissal or expulsion from the institution? No Yes
2. Have you ever been found guilty or convicted of a misdemeanor or felony that was not expunged or sealed? No Yes
Note: Although students with an expunged record may be eligible for enrollment and clinical placement in BW's program, an expunged record may impact a student's eligibility to qualify for a professional license following completion of the program. Eligibility for a professional license varies by state and may be assessed on a case-by-case basis by the professional licensing board.
3. Have you ever tested positive for drug or alcohol use on a urine drug screen? No Yes

If you answered 'Yes' to any of these BACKGROUND INFORMATION questions, please use the space below to give the approximate date and location of each incident, with explanation of the circumstances of each incident.

REQUIRED ACKNOWLEDGMENT

Please click on box to express agreement with statements and thereby allow for processing of your Application Supplement.

I hereby certify that all information in my application is factually true and honestly presented. I understand that any misrepresentation may be cause for denial or cancellation of admission.

Date: _____