



IGPBS / SGPS Admissions

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North Chicago, IL 60064  
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[IGPBS@rosalindfranklin.edu](mailto:IGPBS@rosalindfranklin.edu)

**School of Graduate and Postdoctoral Studies  
Interdisciplinary Graduate Program in Biomedical Sciences (IGPBS)**

Biomedicine and Biotechnologies have been identified by Presidential and Congressional Commissions as one of the leading growth sectors of the American and World economies into the 21st century. You can pursue graduate studies at Rosalind Franklin University of Medicine and Science (RFUMS) in the cutting-edges of biomedical research and place yourself in a competitive position for the 21<sup>st</sup> Century. Research at RFUMS encompasses an in depth concentration of researchers in the areas of Structural Biology, Neurosciences, and Cancer/Cell/Developmental Biology. This includes investigators studying the underlying mechanisms of protein structure and function; to fundamental mechanisms of drug dependency and neurodegenerative diseases such as Alzheimer's and Parkinson's disease as well as the mechanisms of viral induced cancers.

Your decision as to what field of research you should pursue is important and something that you should have time to consider. At RFUMS, students enter into an Interdisciplinary Graduate Program in Biomedical Sciences (IGPBS) which allows them time to receive an education in the most current areas of the biomedical sciences before they select a laboratory in which to conduct their graduate research program. During the first year of the IGPBS, students take a state-of-the-art and highly integrated core curriculum that involves faculty from all the basic science departments. In addition to courses which provide the fundamental principles essential for an understanding of the biomedical sciences, students in the first year of their studies are provided with: 1) introduction to the practical aspects of research, such as the use of biographics (organization and presentation of research data) and bioethics (the issue of authorships, the appropriate use of animals in research, procedures for human studies research, etc.) and 2) first hand experience in research methods through research lab rotations.

During their first year, students see presentations from the faculty about their research programs and then begin laboratory rotations with RFUMS research faculty. This provides each student with the time to evaluate the various research programs at RFUMS before they select the best research program for them. Once this selection is made by the student, they then move into one of the 5 degree granting Departments or Programs at the university. The IGPBS is therefore flexible and totally student oriented. It is designed to provide the most advanced laboratory-based biomedical education that is available in the USA today. Through this program a student will emerge as a highly competitive biomedical scientist for the 21st Century.

We look forward to your application and to meeting you during the interview process. Should you have any questions about the application process, please contact the IGPBS Coordinator at the phone number or email address above.

**ROSALIND FRANKLIN UNIVERSITY  
OF MEDICINE AND SCIENCE**

**SCHOOL OF GRADUATE AND POSTDOCTORAL STUDIES  
INTERDISCIPLINARY GRADUATE PROGRAM IN  
BIOMEDICAL SCIENCES  
IGPBS**



**APPLICATION FOR ADMISSION  
FALL 2012**

ROSALIND FRANKLIN UNIVERSITY  
OF MEDICINE AND SCIENCE

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USA

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## APPLICATION INSTRUCTIONS

The Interdisciplinary Graduate Program in Biomedical Sciences (IGPBS) matriculates students only into the Fall Term each year. Applications are reviewed at regular intervals during the admissions cycle. For maximum consideration, candidates are encouraged to submit their applications and materials as early as possible, but applications will continue to be accepted until the class is filled. To initiate the application process, you must submit all of the following items to the IGPBS Admissions Office.

### Admissions Timeline

- Application Deadline (recommended): January 13, 2012
- On Campus Interviews: March 2, 2012
- International Interviews: Held on a Rolling Basis through March 2, 2012
- Offers of Acceptance: March 9 through April 15, 2012

## SECTION ONE: APPLICATION

Complete the entire application. Please type or print using blue or black ink. Do not leave any section blank. There is no application fee for this program.

## SECTION TWO: TRANSCRIPTS

Candidates must arrange the submission of official transcripts from all colleges or universities attended. This includes community or junior colleges that may have been transferred to a 4-year university. Only transcripts submitted in envelopes signed and sealed by the institution's Registrar will be accepted.

Students who have completed coursework outside of the U.S. are strongly encouraged to submit an official, course-by-course evaluation of this work from World Education Services ([www.wes.org](http://www.wes.org)) or Education Credential Evaluators ([www.ece.org](http://www.ece.org)). RFUMS reserves the right to initiate an evaluation of any international credentials submitted on behalf of an IGPBS candidate.

## SECTION THREE: REFERENCES

A letter from the candidate's primary research mentor is required. Two additional letters of recommendation are required, which can be from professionals and/or academicians who know you well (i.e. research collaborators advisors, professors, or supervisors). Letters of recommendation must be signed, placed in a sealed envelope, and have that person's signature across the seal of the envelope. A recommendation form has been provided for you at the end of the application; however, if the recommender chooses not to utilize our form, he/she must use the appropriate letterhead stationary and envelope of the agency or university for which he/she works or teaches.

## SECTION FOUR: TEST SCORES

**Graduate Record Examination:** All applicants, including foreign medical graduates, are required to supply *official* GRE scores. Verbal, quantitative and analytical portions of the GRE are essential; advanced test scores in the appropriate academic field are recommended. All test scores must be from examinations taken within the past five (5) years. Scores must be sent directly from the Educational Testing Service ([www.ets.org](http://www.ets.org)). Use Institution Code 1117 and a department code indicating your desired area of study.

Biochemistry - 0202

Cell Biology & Anatomy – 0201

Pharmacology – 0216

Neuroscience – 0213

Microbiology & Immunology – 0212

Physiology & Biophysics – 0217

**Test of English as a Foreign Language:** An official score report from the Test of English as a Foreign Language (TOEFL) is required of any applicant who does not hold US citizenship or permanent residency. This test must have been taken within the last two years and scores must be sent directly from the Educational Testing Service ([www.toefl.org](http://www.toefl.org)). This requirement is waived for the following:

- Applicants who have been full-time students in a United States college or university for at least two consecutive years
- Requirement may be waived (upon review) for candidates from countries in which English is the primary language

Please use Institution Code 1117 and a department code 30.

**Rosalind Franklin University of Medicine and Science**  
**School of Graduate and Postdoctoral Studies / Interdisciplinary Graduate Program in Biomedical Sciences**  
**Application Fall 2012**

**PERSONAL INFORMATION**

Full Legal Name: \_\_\_\_\_  
 Family/Surname/Last Name                      First Name                      Middle Name

Other Name(s) Under Which You May Have Educational Records: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Mailing Address (all correspondence will be sent to this address until otherwise notified):

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

State of Legal Residence: \_\_\_\_\_ Citizenship Country: \_\_\_\_\_

Gender                      Date of Birth (MM/DD/YYYY)                      Place of Birth (City, State & Country):  
 Male  Female                      \_\_\_\_/\_\_\_\_/\_\_\_\_                      \_\_\_\_\_

U.S. Citizen or National?                       Yes                       No                      If no, indicate visa status and enclose documentation:  
 Permanent Resident (Please enclose a copy of your permanent resident card) or  Visa Type: \_\_\_\_\_

**ACADEMIC INFORMATION**

List in Chronological Order:

ALL UNDERGRADUATE SCHOOLS ATTENDED:					
NAME OF INSTITUTION	LOCATION (City, State)	ATTENDANCE DATES		MAJOR	DEGREE TYPE / DATE (if any, or when expected)
		From Mo./Yr.	To Mo./Yr.		
1)					
2)					
3)					

ALL GRADUATE OR PROFESSIONAL SCHOOLS ATTENDED:					
NAME OF INSTITUTION	LOCATION (City, State)	ATTENDANCE DATES		MAJOR	DEGREE TYPE / DATE (if any, or when expected)
		From Mo./Yr.	To Mo./Yr.		
1)					
2)					
3)					

## PRIMARY RESEARCH INTEREST

- Molecular and Cellular Processes     Neuroscience     Structural Biology/Biochemistry  
 Other (please specify): \_\_\_\_\_

## ADDITIONAL INFORMATION

Were you ever in the military:     Yes                       No  
If yes, indicate type/date of discharge:     Honorable \_\_\_\_\_     Dishonorable \_\_\_\_\_     Other \_\_\_\_\_

Have you applied to a program at this university before?     Yes                       No  
If yes, state program/date: \_\_\_\_\_

Were you ever the recipient of any action for unacceptable academic performance (e.g. academic probation, dismissal, suspension, disqualification, etc.) or were you ever the recipient of any action for conduct violations (e.g. probation, suspension, dismissal, etc.) by any college or school?     Yes     No  
If yes, please explain (or attach on separate sheet): \_\_\_\_\_

Have you ever been convicted of a misdemeanor or felony?     Yes                       No  
If yes, please explain (or attach on separate sheet): \_\_\_\_\_

Have you ever been the recipient of any action (disciplinary, suspension, disqualification, revocation, etc.) relating to any professional license or certification you have ever held?     Yes                       No  
If yes, please explain (or attach on separate sheet): \_\_\_\_\_

## ESSAYS (REQUIRED)

Please attach three separate essays detailing your experiences in the relevant areas below.

**1) Professional Organizations/Certifications/Honors** Include a description of the following (you may attach a CV or resume):

- Employment history
- Extracurricular activities
- Vocational activities
- Offices held
- Honors and achievements
- Research fellowships / Teaching assistantships
- Honorary or professional society memberships
- Professional certifications or licensures

**2) Research Experience and Scientific Publications** - Outline your research experience. Include a chronological list of all publications or abstracts on which your name appears. Title, date and all contributing author information is required.

**3) Personal Statement** - A one-page personal essay describing your motivation, career goals, and reasons for pursuing your Ph.D. studies at RFUMS. **List the names of three (3) RFUMS researchers in whose work you are interested.**

## SUPPORTING MATERIALS

Please list the materials enclosed or being sent in support of this application:

### College or University Transcripts:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

**Letters of Recommendation** - Indicate the names and institutions of your recommenders.

1. \_\_\_\_\_ (Primary Research Mentor)
2. \_\_\_\_\_
3. \_\_\_\_\_

### Graduate Record Exam Scores:

Exam Date	Verbal	Quantitative	Analytical

### TOEFL Scores (Choose exam type below)

- Internet Based     Computer Based     Paper Based

Exam Date	Listening	Reading	Writing	Speaking	Total

My signature below indicates that all the information submitted in (and in support of) this application is complete and correct to the best of my knowledge. I understand that I must be able (with reasonable accommodations) to meet the technical standards of the Program.

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

*Rosalind Franklin University provides equality of opportunity in its educational programs for all persons, maintains nondiscriminatory admissions policies, and considers for admission all qualified students regardless of race, color, sex, sexual orientation, religion, national or ethnic origin, citizenship status, disability, status as a veteran, age, or marital status.*

*If at any time during the admissions process you find it necessary to withdraw your application from consideration, please notify the IGPBS Admissions Office in writing (email is acceptable).*

## DEMOGRAPHIC INFORMATION

The demographic information will be used to help evaluate our efforts relative to providing equal educational opportunity for all incoming students. These data will not be used as selection criteria during the admission process. Various accrediting agencies rely on us to provide them with an accurate portrayal of our applicant pool.

### Where did you hear about the Interdisciplinary Graduate Program in Biomedical Sciences (IGPBS)?

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Brochure                                      | <input type="checkbox"/> RFUMS Mailing    | <input type="checkbox"/> RFUMS Recruiter |
| <input type="checkbox"/> Pre-Health Advisor                            | <input type="checkbox"/> RFUMS Open House | <input type="checkbox"/> RFUMS Website   |
| <input type="checkbox"/> Other Website: _____<br><i>Please specify</i> |   |  |
| <input type="checkbox"/> RFUMS Student:                                | _____                                     |  |
|  | <i>Name</i>                               |  |
| <input type="checkbox"/> RFUMS Alumnus:                                | _____                                     |  |
|  | <i>Name</i>                               |  |
| <input type="checkbox"/> Other:  | _____                                     |  |
|  | <i>Please specify</i>                     |  |

### Ethnic/Racial Origin

- |   |   |
|---|---|
| <input type="checkbox"/> Spanish/Hispanic/Latino/Latina |   |
| <input type="checkbox"/> Cuban                          |   |
| <input type="checkbox"/> Mexican                        |   |
| <input type="checkbox"/> Puerto Rican                   |   |
| <input type="checkbox"/> South or Central American      |   |
| <input type="checkbox"/> Other Hispanic                 |   |
| <br>  |   |
| <input type="checkbox"/> Non-Hispanic                   |   |
| <input type="checkbox"/> Black                          | <input type="checkbox"/> Native American        |
| <input type="checkbox"/> White                          | <input type="checkbox"/> Alaskan Native         |
| <input type="checkbox"/> Asian                          | <input type="checkbox"/> American Indian        |
| <input type="checkbox"/> Cambodian                      | <input type="checkbox"/> Pacific Islander       |
| <input type="checkbox"/> Chinese                        | <input type="checkbox"/> Guamanian or Chamoro   |
| <input type="checkbox"/> Filipino                       | <input type="checkbox"/> Native Hawaii          |
| <input type="checkbox"/> Indian                         | <input type="checkbox"/> Samoan                 |
| <input type="checkbox"/> Japanese                       | <input type="checkbox"/> Other Pacific Islander |
| <input type="checkbox"/> Korean                         |   |
| <input type="checkbox"/> Laotian                        |   |
| <input type="checkbox"/> Malaysian                      |   |
| <input type="checkbox"/> Pakistani                      |   |
| <input type="checkbox"/> Thai                           |   |
| <input type="checkbox"/> Vietnamese                     |   |
| <input type="checkbox"/> Other Asian                    |   |



10. In addition to your response on the front side of this form, please give your personal evaluation of and reaction to the applicant. (You may wish to amplify some of your previous comments.) **NOTICE: Letter MUST arrive in signed, sealed letterhead envelope to be deemed official.**

My recommendation is:     Very Enthusiastic         Strong         Neutral         Negative

Please print your name \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Position \_\_\_\_\_ Institution \_\_\_\_\_

Phone \_\_\_\_\_ Email: \_\_\_\_\_

**NOTICE: Letter MUST arrive in a sealed letterhead envelope bearing the author's signature across the external envelope flap to be deemed official.**