

FLORIDA A&M UNIVERSITY

COLLEGE OF PHARMACY AND PHARMACEUTICAL SCIENCES

DOCTOR OF PHARMACY (PHARM.D) PROGRAM

SUPPLEMENTAL APPLICATION INSTRUCTIONS

FALL 2012

The following information must be completed and received in the Florida A&M University (FAMU) College of Pharmacy Office of Student Services by the FEBRUARY 1, 2012 application deadline. Incomplete applications will not be considered. Only selected applicants will be invited to participate in the interview process.

Due to limited class size, it is impossible to accommodate all qualified applicants to our program. We strongly suggest that you apply to a minimum of five (5) colleges/schools of pharmacy.

- All applicants must complete the Florida A&M University undergraduate application for admission on-line via the FAMU website at www.famu.edu, with the appropriate fee. If a hard copy is submitted it must be accompanied by the application fee (check or money order) and mailed directly to the Florida A&M University Office of Undergraduate Admissions; Foote-Hilyer Admin. Center; Suite G-9; Attn: Pharmacy Admission Fall 2012; Tallahassee, FL 32307-3200.
- A **College of Pharmacy Supplemental Application (typewritten)** must be completed, signed and notarized. The Pharmacy Supplemental Application must be submitted directly to FAMU College of Pharmacy, Office of Student Services, 1415 South Martin Luther King Jr., Blvd., Tallahassee FL 32307-3800 by February 1, 2012. There is no fee for the Supplemental Application.
- Two (2) official transcripts from **all** accredited colleges/universities attended must be submitted directly to the College of Pharmacy Office of Student Services. Transcripts must be mailed directly from the registrar of the colleges/universities attended. Electronic transcripts cannot be accepted by the FAMU College of Pharmacy. **It is the responsibility of the applicant to ensure that all transcripts are sent before the February 1, 2012 application deadline. We do not make exceptions for the late arrival of transcripts.** If currently enrolled for fall 2011 term, the official transcript(s) must include grades for the current term.
- Three (3) letters of recommendation are required. Recommendation letters and evaluation forms **must** be from a pharmacist, a professor, and a person familiar with your potential for study in a pharmacy professional program. (Please note: Letters from peers or relatives are unacceptable.)
- If you have attended a school or college of pharmacy, you must submit a letter of recommendation mailed directly from the dean of the school/college of pharmacy indicating your academic status.
- All students **must** have a minimum 2.50 grade point average (GPA) in English Language Skills and Mathematics either by passing the courses or by exemption from SAT/ACT.
- Transfer students entering FAMU must have completed two (2) years of the same foreign language in high school or eight semester hours (or the equivalent) of a foreign language at an accredited undergraduate institution prior to enrollment. Each applicant must document completion of this requirement prior to admission.

If any changes occur after submitting your application, please notify the College of Pharmacy in writing immediately. Failure to do so could result in reversal of a favorable decision. **A minimum 2.75 GPA (based on 4.00 scale) is required for consideration with a "C" grade or better** in all transferable course work (C- Grades are not acceptable).

Please sign below acknowledging that all information listed above is completed before submitting your Supplemental Application to the College of Pharmacy.

Signature (Please print and sign)

Date

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Preference of Location:

☐ College of Pharmacy Main Campus ☐ Crestview Learning Center ☐ No Preference

Note: Selection of a location preference *does not* guarantee admission to the Florida A&M University College of Pharmacy and Pharmaceutical Sciences

Background Information:

Name: _____
Last (Maiden) First Middle

U.S. Social Security Number _____ **Date of Birth:** _____

Current Address: _____
Address City State Zip Code

Permanent Home Address: _____
Address City State Zip Code

Telephone Number: _____ - _____ - _____ **Cellular:** _____ - _____ - _____

E-mail Address: _____

Personal Data (Optional)

Gender: ☐ Female ☐ Male

Race/Ethnic Origin: ☐ American Indian or Native Alaskan ☐ Asian or Pacific Islander
☐ Black (non-Hispanic) ☐ Hispanic
☐ White ☐ Other (If other please specify) _____

Nation of Citizenship: _____

State of Residency: _____

Are you currently attending or have you ever attended Florida A&M University? ☐ Yes ☐ No

If yes, please specify date and major: _____

Have you previously applied to the FAMU College of Pharmacy? ☐ Yes ☐ No

If yes, when: _____ Briefly describe what you have done or will be doing to enhance your application. _____

Pharmacy Career/ Health Career Opportunity:

Have you worked in a Pharmacy in the United States? ☐ Yes ☐ No

If yes, in what position(s) and how long? _____

Have you been a participant in any of the following health career programs? Health Careers Opportunity Program (HCOP), Minority Access to Research Careers (MARC), Minority Biomedical Research Support (MBRS) or BRIDGES? ☐ Yes ☐ No If yes, which program and institution? _____

Current College/University Information:

Please list below all colleges, universities, trade or technical schools attended. List all degrees earned/expected. Please list additional names that may appear on transcript(s) on the line below:

Name of College/University	Location	Dates of Attendance From/To	Degree(s) Earned/Expected

Courses Enrolled/Planned: List all courses you plan to complete during Academic Year 2011–2012 (i.e. winter term/quarter/fall semester, spring term/quarter/spring semester). If you are not currently enrolled in any courses please indicate “not attending.” **Pre-requisite courses must be completed by June 1, 2012.**

Department	Course No.	Credits	Date to be Completed	Course Title

Personal Background Questions (Required):

A. Have you ever been on academic probation, suspension or dismissal from any academic institution? ☐ Yes ☐ No

If yes, please explain: _____

B. Have you ever been charged with or subject to disciplinary action for scholastic or any other type of misconduct at any educational institution? ☐ Yes ☐ No If yes, please explain: _____

C. Have you ever been charged with a violation of the law which resulted in probation, community service, a jail sentence, or the revocation or suspension of your driver's license (including traffic violations which resulted in a fine of \$200.00 or more)?
☐ Yes ☐ No

D. Are you currently under investigation or have any adjudication against you for any violations of the law? ☐ Yes ☐ No

If your answer to any of the above questions is yes, you must include a full statement of relevant facts on a separate sheet attached to this application. You may be required to furnish the University with copies of all official documentation explaining the final disposition of the proceedings.

Personal Statements:

Please answer the two essay statements below. The statements should include information that you view to be important in evaluating your application to the Florida A&M University College of Pharmacy. This is your opportunity to illustrate your strengths outside of the classroom. *The personal statements must be limited to this page.*

1. The College seeks applicants committed to pursuing a career in pharmacy. When did you first become interested in the field of pharmacy? How have you pursued your interest, education, community service and professional experience?

1. The Florida A&M University College of Pharmacy and Pharmaceutical Sciences offer an academic environment with enormous potential and possibilities for success, excellence, and leadership. Describe your reasons for selecting this College. What makes you and your interests a good fit for our pharmacy professional program?

NOTE: Failure to complete and truthfully execute the application for admission to the College of Pharmacy and Pharmaceutical Sciences at Florida A&M University or the omission of any information will result in the cancellation of admission and/or expulsion from the College of Pharmacy. Your application for admission to the College of Pharmacy will not be complete without this statement and notarization.

Your attention is called to Chapter 6C-6.001 of the Rule Florida Department of Education.

(6) False or Fraudulent Statements - In addition to any other penalties which may be imposed an individual may be denied admission or further registration, and the universities may invalidate college credit for work done by a student at an State University System (SUS) institution and invalidate the degree based upon such credit if it finds that the applicant has made false or fraudulent or incomplete statements in his/her application; residence affidavit, or accompanying documents or statements in connection with, or supplemental to, his/her application for admission to, or graduation from one of the SUS institutions.

I certify that the information contained in this application is true and complete. I agree that said statements for the basis of my application. I authorize the Florida A&M University College of Pharmacy to make any inquiries that they deem appropriate and to secure any additional information. I understand that my admission and/or enrollment in the College can be revoked if any information submitted on my behalf is false, fraudulent or forged.

(Signature of Applicant)

Sworn to and subscribed before me this _____ day of _____, 20_____.

Signature of Notary Public - State of

(SEAL)

Print, Type or Stamp Name of Notary Public

Personally Known ☐ or ID Produced ☐

Type of Identification Produced: _____

IMPORTANT NOTICES:

I. STUDENT FINGERPRINTING, BACKGROUND SCREENINGS, AND DRUG SCREENINGS

Students admitted to the FAMU College of Pharmacy and Pharmaceutical Sciences participating in field experiences as a part of their educational program are required to undergo fingerprinting, background screenings, and/or drug screenings prior to participating in required clinical experiences. Information revealed in the background screening may preclude students from participating in the clinical requirements/experience of the program, thus making them ineligible to fulfill the degree requirements and jeopardize sitting for required post-graduate licensure examinations. Students will pay for all fingerprinting, background screenings, and/or drug screenings, unless the costs are paid by the affiliated agency. All screenings will be processed through the official University vendor.

II. The Advanced Pharmacy Practice Experience (APPE) of the curriculum is conducted at Instructional Sites other than the main campus located in Tallahassee, Florida. Students will be required to relocate to their assigned APPE site (Davie, Jacksonville, Tampa or Crestview) at their expense in order to complete the APPE phase of the program. The APPE Instructional Sites are assigned by the College.