



NEW YORK MEDICAL COLLEGE
School of Health Sciences and Practice
— and —
INSTITUTE OF PUBLIC HEALTH

DOCTOR OF PUBLIC HEALTH IN HEALTH POLICY & MANAGEMENT
APPLICATION PACKAGE FOR THE CLASS BEGINNING 2012

Dear Applicant:

Thank you for your interest in the Doctor of Public Health Program in the School of Health Sciences and Practice at New York Medical College.

The following application package contains information and materials for a self-managed application process:

- Application instructions
- Application
- Admissions requirements
- Graduate course worksheet
- Recommendation form
- Self ID form
- Transcript request form

Please follow the instructions for completing the application and submitting the required documents in one package to the Admissions Office.

Scores for the *Graduate Record Examination General Examination (GRE)* or *MCAT, LSAT, or GMAT scores* (if applicable) and *Test of English as Foreign Language (TOEFL)* scores (if appropriate) are not to be included in this package. They are sent to us directly from the testing organizations.

The following contains information about the curriculum and admissions requirements for our Doctor of Public Health in Health Policy & Management. The entry date for the program is the fall term. **Your application and all appropriate documentation must be ready for review by the Admissions Committee by June 1st for the fall semester (April 2nd for international applicants).**

Students are admitted for classes beginning in the fall semester only. Students pay for courses on a per credit basis. The tuition for the academic year 2012-2013 is presently set at \$835 per credit. The tuition is subject to change each academic year. Financial aid information is available from the Student Financial Planning Office at (914) 594-4491 or <http://www.nymc.edu/AdmissionsAndFinancialAid/StudentFinancialPlanning/index.html>.

Please contact the Director of Recruitment, Pamela Suett, at 914-594-4510 or shsp_admissions@nymc.edu if you have any questions about the program or application process.

Sincerely,

Admissions Office
New York Medical College
School of Health Science and Practice
Valhalla, NY 10595



INSTRUCTIONS FOR APPLICATION

Check list of items to be provided:

1. Complete and sign the *Application for Admission* which must be accompanied by a check or money order for the \$100 non-refundable application fee made payable to *New York Medical College*;
2. Complete the *Graduate Course Worksheet* with the courses that you have taken in fulfillment of the requirements;
3. A typed, double-spaced, personal statement of the career and education goals, not to exceed 3 pages;
4. *Self Identification Form*;
5. GRE scores (sent directly to us from ETS). Applicants must submit results of the *Graduate Record Examination General test (GRE)*, taken within the last two years. If MCAT, GMAT, LCAT scores are submitted, they must be from within the last three years. GRE examination should be scheduled no later than 6 weeks prior to the application deadline, which is June 1 for the fall semester.
6. Three *Recommendation Forms*, each in a sealed, signed envelope;
7. Transcripts from **all** post-secondary schools attended. Make additional copies of the *Transcript Request Form*, if necessary;
8. A resume;
9. International applicants must submit the *Test of English as a Foreign Language (TOEFL)* Or *International English Language Testing System (IELTS)* score and an official evaluation of foreign academic credentials. See additional information for international students and those requiring official evaluation of foreign academic credentials (separate attachment). Scores are sent directly to us from www.ets.org.

Instruction Details:

PERSONAL STATEMENT

Please attach a typed essay of no more than 3 pages. In this essay, you should address the following questions:

- a) What events led to your decision to obtain a doctor of public health in health policy and management?
- b) How will this degree and this discipline help you to advance the discipline of public health



Doctorate of Public Health in Health Policy & Management

RECOMMENDATIONS

Please submit three recommendations. At least two must be from graduate professors. Do not submit recommendations from either relatives or close family friends. All recommendations must have been written within the past year. Do not submit more than three references. **In requesting recommendations, use the forms provided.** Address the envelopes to yourself. When you receive the sealed envelopes from the recommenders, do not open them, but simply include them with the rest of your application.

TRANSCRIPTS

You are required to submit an official transcript from **all post-secondary institutions** you have attended as a registered student, regardless of the number of credits taken, degree obtained, or whether you were full-time or part-time. The transcript request form instructs the registrar to return to you an official transcript along with the request form in a sealed envelope signed across the seal. Do not open the sealed envelope, but simply include it with your application. If you have attended **more than one** college, make a photocopy of the request form and ask the registrar(s) to sign across the back of the institution's envelope.

All applicants with foreign transcripts require an official evaluation of their diplomas and grade sheets from an accredited agency, which is to be provided with all other materials by the deadline date for submission of applications. This should include credit hour equivalents with an explanation of the grading system at the foreign institution. The official evaluation should be sent directly to the Admissions Office from the evaluation agency. Originals and certified English translations are required for all official transcripts, grade sheets, diplomas and licenses that are not in English. All transcripts, diplomas and licenses must be on official paper and certified. Please see additional information for international students.

GRADUATE RECORD EXAMINATION (GRE)

Applicants must submit results of the *Graduate Record Examination General test*. Have the results submitted to the School of Health Sciences and Practice of New York Medical College. **The institution number to use for the test is 2563.** For information, contact the Educational Testing Service, PO Box 6000, Princeton, NJ 085416000; (609) 921-9000. MCAT, GMAT, or LMAT scores may be submitted in lieu of the GRE if the test was taken within the last three years.

FOREIGN TRANSCRIPTS

All applicants with foreign transcripts must obtain an official evaluation of their diplomas and grade sheets from a U.S. agency such as World Education Services (WES-www.wes.org). The evaluation should include credit hour equivalents with an explanation of the grading system at the foreign institution. The official evaluation should include the cumulative Grade Point Average (GPA). The official evaluation should be sent from the evaluation service to the Admissions Office (WES provides electronic access to evaluations and transcripts). If using agency other than WES, originals and certified English translations are required for all official transcripts, grade sheets, diplomas, and licenses that are not in English. Transcripts, diplomas and licenses must be on official paper and certified. If it is not possible to send originals with the application, original notarized copies must be provided. In this case, students are required to present originals to be witnessed by Admissions Office staff before registration.

TOEFL/IELTS – see admission requirements in the application.

INTERVIEW

After review of the application packet, the Admissions Committee will request an in-person interview from competitive applicants. The interview will be arranged and coordinated by the Director of the Doctoral Program. Following the interview, applicants will be notified of the Committee's decision in writing.

Questions and further information: Email shsp_admissions@nymc.edu or call Admissions at 914-594-4759.

All materials should be sent directly to:

New York Medical College
School of Health Sciences and Practice
Admissions Office – Room 316
Valhalla, NY 10595



Admission Procedures

All applications to the doctoral program, when completed, are reviewed by the Admissions Committee. Applicants deemed qualified by the Admissions Committee will be invited for an interview. Accepted students must send a non-refundable deposit of \$500 to hold their space in the program. This deposit will be applied to the first semester's tuition.

Acceptance to the program is based on a variety of factors, including the prior academic record, personal statement, recommendations, prior experience, and GRE (MCAT, LSAT, GMAT) scores. Students with foreign transcripts must present TOEFL scores and educational evaluations of their documents. (Students requiring I-20 forms, please see the separate information below for International Students.) Acceptance is also contingent upon the number of spaces available in the program. In the event that the number of allotted spaces for a specific term has been filled, an eligible student may be placed on a waiting list for the following year. In this case, applications will remain active for one year.

Admission Requirements

1. Master of Public Health (MPH) in Health Policy & Management or a master's degree in a related health field. Accepted applicants who do not have an MPH in the appropriate area prior to beginning the DrPH, may need to complete some coursework required for the MPH in Health Policy and Management;
2. A GPA of at least a 3.5; official copies of all post-secondary school transcripts must be submitted. Applicants with foreign transcripts must submit educational evaluations of all courses taken;
3. A completed *Application for Admission to the Doctor of Public Health in Health Policy & Management* and a non-refundable application fee of \$100 (\$150 for International applicants);
4. *Graduate Course Worksheet* completed to the best of the applicant's ability; this helps us better understand your graduate experience. It is understood that not all applicants will have completed courses in all of the discipline areas noted on the worksheet; however applicants who have not completed the six required prerequisites may need to complete these courses prior to beginning the DrPH program.
5. Submit scores of the Graduate Record Examination (GRE) and have achieved a minimum rank of the 50th percentile on all sections. The institution number to use for the test is 2563. For information, contact the Educations Testing Service (ETS), PO Box 6000, Princeton, NJ 08541-6000; (609) 921-9000. **MCAT, LSAT or GMAT** scores may be submitted in lieu of the GRE's, however, they must have been attained within the last four years.
6. A *Personal Statement* of approximately 500 words describing:
 - The applicant's interest and commitment to public health and the area(s) of health



Doctorate of Public Health in Health Policy & Management

policy and management in which the applicant wishes to focus his/her research;

7. Three letters of recommendation; at least two must be from graduate faculty members;
8. A current resume;
9. Proof of immunization.
10. All applicants who are in any of the following categories are required to obtain a minimum eligibility score of at least 660 (PBT), 287 (CBT – a minimum of 5 on the essay section), or 117 (IBT – no score lower than 27 on each of the 4 sections) on the *Test of English as a Foreign Language* (TOEFL) or the International English Language Testing System (IELTS) – minimum of Band 8:
 - a) those whose naïve language is not English;
 - b) those from countries where English is one of the official languages, but not necessarily the first language of the majority of the population;
 - c) those from countries where English is not a native language, although available as a language of instruction at all or some levels of schooling;
 - d) those whose transcripts are not in English or from schools in non-English-speaking countries.

The institution number to use for the test is 2592. For information, contact the Educational Testing Service (TOEFL), PO Box 6152, Princeton, NJ 08541-6000; telephone (609) 921-9000; e-mail: toefl@ets.org, web site: <http://www.toefl.org>

For information about the IELTS exam: contact IELTS, Inc., 100 East Corson Street, Suite 200, Pasadena, CA 9000; phone: (626) 564-2954; fax (626) 526-2981; email: ielts@ceii.org; website: www.ielts.org

Information for international applicants regarding additional documentation (including financial support documentation) that must be submitted is on our [website](#).

Accepted students must send a non-refundable deposit of \$500 to hold their space in the program.



GRADUATE COURSE WORKSHEET

To be completed by Applicant

Name _____

Date _____

REQUIRED CORE PREREQUISITES: <i>(please list the courses that correspond most closely to the requirements as stated below)</i>	Name & number of Course	# of credits	Semester and year when course taken	College or University	Grade
Health Policy One course in health policy management One course in health economics	1. 2.				
Public Health One course in environmental health One course in behavioral health	1. 2.				
Biostatistics & Epidemiology One course in statistical approaches for research One course in principles and practices of epidemiology	1. 2.				
OTHER RELEVANT COURSES TAKEN: Law & health Financial administration Managing health care Organizational theory Elective Elective Elective Elective	1. 2. 3. 4. 5. 6. 7. 8.				
Public Health Practicum Experience	1.				
Public Health Culminating Experience (Thesis, Capstone or equivalent)	1.				

Answer each of the following questions based on your personal knowledge of the applicant. If you are unable to answer a question because of insufficient knowledge, indicate that you are “unable to judge.” You may add additional comments on a separate sheet of paper.

NOTE: Regardless of the format you choose for answering the following questions (write-in response below or in a separate letter), please complete all sections on page 1. Thank you.

How well-suited is the applicant for a doctoral program which requires that students be independent learners with the self-discipline and ability to engage in scientific reasoning?

Comment on what you think is the applicant’s greatest strengths and weaknesses.



SELF-IDENTIFICATION FORM

The School of Health Sciences and Practice is committed to the education of persons from minority ethnic backgrounds. We need to gather information from our applicants in order to monitor our progress in this effort. If you do not choose to provide this information, please check off the last selection. Your response to this question will not in any way affect an admissions decision.

Male _____ Female _____

Please check one:

RACIAL/ETHNIC BACKGROUND:

_____ BLACK, NON-HISPANIC

A person having origins in any of the black racial groups of Africa.

_____ AMERICAN INDIAN OR ALASKAN NATIVE

A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.

_____ ASIAN OR PACIFIC ISLANDER

A person having origins in any of the original peoples of the Far East, Southeast Asian, the Indian Subcontinent, or the Pacific Islands. This includes people from China, India, Japan, Korea, the Philippine Islands, American Samoa and Vietnam.

_____ HISPANIC

A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

_____ WHITE, NON-HISPANIC

A person having origins in any of the original peoples of Europe, North Africa, or in the Middle East.

_____ IF OTHER, PLEASE SPECIFY _____

_____ I CHOOSE NOT TO RESPOND



DOCTOR OF PUBLIC HEALTH HEALTH POLICY & MANAGEMENT

Transcript Request Form for United States Colleges and Universities

To the Applicant:

Please complete the information requested below and send this form to your College Registrar with the self-addressed envelope. If you have attended more than one college, please photocopy this form for use by the additional institution(s).

TO BE COMPLETED BY THE APPLICANT:

Name _____

Social Security Number ____ - ____ - ____

College _____

Dates of _____ Degree and Year _____

I hereby authorize the release of an official transcript of my academic record to the Doctor of Public Health in Health Policy & Management in the School of Public Health at New York Medical College.

Signature of Applicant

Date

TO THE INSTITUTION:

The above named person is applying to the Doctor of Public Health in Health Policy & Management in the School of Health Sciences and Practice Health at New York Medical College. Please enclose this form together with an official transcript in your institution's official envelope. Please seal the envelope and sign across the envelope seal. Return the sealed envelope to the applicant who will include it with the application. **Please do not stamp "Given to Student" on the official transcript.**