



# NEW YORK MEDICAL COLLEGE

A MEMBER OF THE Touro College and University System

**School of Health Sciences and Practice**  
and INSTITUTE OF PUBLIC HEALTH

## APPLICATION FOR ADMISSION TO CERTIFICATE PROGRAM (Current Degree Students)

Please sign, date, and complete this application, include a new personal statement, and scan/email to [irene\\_bundziak@nymc.edu](mailto:irene_bundziak@nymc.edu) or FAX (914-394-3961) to the Admissions Office. TYPE OR PRINT CLEARLY IN INK.

NAME \_\_\_\_\_  
Prefix Last First Middle

Student ID # \_\_\_\_\_

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ MALE / FEMALE \_\_\_\_\_

ANY NAME PREVIOUSLY USED \_\_\_\_\_

### CURRENT ADDRESS

\_\_\_\_\_  
Number and Street  
\_\_\_\_\_  
City County State Zip Code

UNTIL WHAT DATE? \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

### PERMANENT ADDRESS (if different from current)

\_\_\_\_\_  
Number and Street  
\_\_\_\_\_  
City County State Zip Code

HOME PHONE (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ CELL PHONE (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
(Current)

BUSINESS PHONE (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ WORK DAYS/HOURS \_\_\_\_\_

(over)

**CURRENT MPH PROGRAM:** \_\_\_\_\_

**TERM OF APPLICATION FOR CERTIFICATE:**

\_\_\_\_ **FALL/YEAR** \_\_\_\_    \_\_\_\_ **SPRING/YEAR** \_\_\_\_    \_\_\_\_ **SUMMER/YEAR** \_\_\_\_

**CERTIFICATE: (Check one)**        \_\_\_\_ **campus**        \_\_\_\_ **online**

\_\_\_\_ Emergency Preparedness (Division of Health Policy and Management Department)

\_\_\_\_ Global Health (Division of Health Policy and Management Department)

\_\_\_\_ Health Education (Division of Epidemiology and Community Health Department)

\_\_\_\_ Industrial Hygiene (Division of Environmental Health Science Department)

\_\_\_\_ Advanced Public Health (Division of Epidemiology and Community Health Department) – on campus only

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Month/Day/Year

**Office Use Only – Signatures Required**

\_\_\_\_\_  
Program Director (for degree program) Date

\_\_\_\_\_  
Certificate Program Director Date