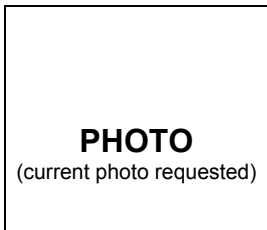


# Application For Admission

**Confidential**



**Please read before completing this application.**

1. Complete the application in full.
2. All responses must be typed– for a PDF or online version, visit our website: [www.scnm.edu](http://www.scnm.edu).
3. Please do not staple application materials.
4. Enclose a non-refundable application fee of \$65. (\$90 international apps, \$40 transfer students)
5. Submit a resume and current photo.
6. Request official transcripts from each college or university attended be sent directly to the Southwest College Admissions Office.
7. Submit recommendation form and letter from each of the following references: Academic, Occupational and Health Professional. Letters should be sent by the reference to SCNM.

## I. GENERAL INFORMATION

Name

\_\_\_\_\_

Last                                      First                                      Middle                                      Campus Web ID number (if known)

Social Security Number \*\* \_\_\_\_\_ Planned Enrollment:  Fall  Spring Year: \_\_\_\_\_

Sex:\*\*  Male  Female                      Date of Birth (mo./date/year) \*\* \_\_\_\_\_                      Place of Birth (city/state) \*\* \_\_\_\_\_

Are you applying for Transfer or Advanced Standing? (applicants w/ graduate work)  Yes (see fees)  No

List any other names that may appear on your transcripts/records: (i.e. birth name) \_\_\_\_\_

Present Mailing Address \_\_\_\_\_

Permanent Mailing Address \_\_\_\_\_

Street \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (day) \_\_\_\_\_

Telephone (day) \_\_\_\_\_

Telephone (evening) \_\_\_\_\_

Telephone (evening) \_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Address applicable until

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Address applicable until

E-mail Address: \_\_\_\_\_

Citizenship:  U.S.  Other (specify country) \_\_\_\_\_

Type of Visa (if not U.S. Citizen)

- |  |   |
|--|---|
| <input type="checkbox"/> Student (F-1)                       | <input type="checkbox"/> Exchange Visitor (J-1)       |
| <input type="checkbox"/> Permanent Resident (Immigrant U.S.) | <input type="checkbox"/> Other (please specify) _____ |

Predominant Cultural/Ethnic Background \*\* (Information gathered will be used in a nondiscriminatory manner applicable with civil rights laws)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Hispanic            | <input type="checkbox"/> Black, not Hispanic               | <input type="checkbox"/> Asian or Pacific Islander |
| <input type="checkbox"/> White, not Hispanic | <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Other                     |

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact

Address: \_\_\_\_\_

How did you hear about SCNM? \_\_\_\_\_

Please list other colleges to which you are applying at this time. \_\_\_\_\_

1. Have you ever been convicted of, pled guilty or no contest to, or forfeited bail for any criminal conduct under law or ordinance, excluding only minor traffic violations?  Yes  No If "Yes," please attach a full explanation.
2. Have you ever applied to Southwest College before?  Yes  No  
If yes, were you  Accepted  Denied  Not Interviewed

## II. ESSAYS

New applicants are to address questions 1 - 4. Applicants who have previously applied for admission, please address questions 1 - 5. Transfer applicants should address question 1 - 4 & 6. Essays combined should total no more than 4 pages typed, double-spaced.

1. Why do you want to become a Naturopathic Physician? Describe the events that led you to this decision. Describe why you would be an asset to the naturopathic profession.
2. Discuss a medical ethics issue or any issue in medicine about which you feel strongly.
3. What role does naturopathic medicine play in the health care system? Explain.
4. Describe the characteristics of a model physician and, of those characteristics/attributes, which do you possess? Finally, how does a physician's social responsibility fit into this description?
5. If you were previously denied admission or offered admission but did not enroll at Southwest College, please describe what steps you have taken to strengthen your application and/or why you feel now is the appropriate time to reapply.
6. What motivates you to transfer to Southwest College? How do you feel our program is more suited to your needs?

## III. EDUCATION

### Record of Colleges/Universities Attended:

List all accredited or candidate post-secondary institutions in order of attendance beginning with the most recent. If you are still in college, indicate your anticipated date of completion. Attach additional sheet if necessary.

| Institution | City | State | Major | Dates Attended | Degree | Year |
|-------------|------|-------|-------|----------------|--------|------|
|             |      |       |       |                |        |      |
|             |      |       |       |                |        |      |
|             |      |       |       |                |        |      |

### Applicant Self-Assessment:

Please assess yourself using the following categories.

| Characteristic               | Excellent | Very Good | Good | Fair | Needs Development |
|------------------------------|-----------|-----------|------|------|-------------------|
| Intellectual Potential       |           |           |      |      |                   |
| Problem Solving Skills       |           |           |      |      |                   |
| Organizational Skills        |           |           |      |      |                   |
| Time Management Skills       |           |           |      |      |                   |
| Self Discipline              |           |           |      |      |                   |
| Study Habits                 |           |           |      |      |                   |
| Business Management Skills   |           |           |      |      |                   |
| Oral Communication Skills    |           |           |      |      |                   |
| Written Communication Skills |           |           |      |      |                   |
| Interpersonal Skills         |           |           |      |      |                   |
| Concern for Others           |           |           |      |      |                   |
| Maturity                     |           |           |      |      |                   |
| Health                       |           |           |      |      |                   |
| Stress Management Skills     |           |           |      |      |                   |

Have you completed all prerequisites for admission to the program?  Yes  No

If not, you may still apply, as long as you complete all prerequisites prior to entering the program. **All current official transcripts must be received by Southwest College prior to your scheduled interview.**

- Fill in courses required for admission.
- List all upcoming courses or courses in progress and when they will be taken (term/year)
- All credits will be verified and totaled. For students with quarter credits: 1 semester credit = 1.5 quarter credits.
- All courses listed here will be verified upon receipt of official transcripts. Grades below "C" will not be accepted

| Prerequisite   | College | Course Title and # | Lab | Total # Sem. Credits | Total #Qtr. Credits | Grade | Completion Date |
|--|---------|--------------------|-----|----------------------|---------------------|-------|-----------------|
| *Biology<br>12 sem cr. w/lab<br>Science major level  |         |                    |     |                      |                     |       |                 |
| *Chemistry<br>8 sem cr. w/lab<br>Science major level |         |                    |     |                      |                     |       |                 |
| *Organic Chemistry<br>4 sem cr. w/lab                |         |                    |     |                      |                     |       |                 |
| Physics<br>1 class                                   |         |                    |     |                      |                     |       |                 |
| English Comp.<br>3 sem cr.                           |         |                    |     |                      |                     |       |                 |
| English<br>3 sem cr.                                 |         |                    |     |                      |                     |       |                 |
| Humanities<br>6 sem cr.                              |         |                    |     |                      |                     |       |                 |
| Psychology<br>6 sem cr.                              |         |                    |     |                      |                     |       |                 |

\*science classes must be within the last 7 years.

#### IV. Employment History:

Please attach a professional resume listing employment beginning with your most recent employer. Please include any medical or health care experience. Your resume may also include: community service experiences; research/lab work; teaching and tutoring experience; honors, awards and recognition; conferences attended; presentations; publications; extracurricular hobbies; other leadership experiences; and patents or licenses owned or pending.

1. Have you ever been licensed as a health care provider?  Yes  No  
If "Yes," please attach a copy of your license. Mark 'copy' across the face of duplicate.

Answer questions 2-4 only if you answered yes to question IV 1.

2. Has your health care license been suspended /revoked?  Yes  No  
If "Yes" please attach an explanation.

3. Have you been accused of malpractice?  Yes  No  
If "Yes" please attach an explanation.

4. Do you carry professional liability insurance?  Yes  No  
If "Yes" please attach a copy of your cover sheet.

5. Describe the accomplishments of which you are most proud in your work history. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe how you overcame a challenging work experience. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**V. ADDITIONAL INFORMATION**

1. Studies of Natural Healing/Nutrition/Counseling/Acupuncture/other:

| Type of Class or Experience | Where Completed | Dates |
|-----------------------------|-----------------|-------|
|                             |                 |       |
|                             |                 |       |
|                             |                 |       |

2. What health and/or personal accomplishments are you most pleased with, and why? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby affirm that the foregoing information is true and accurate to the best of my knowledge. I understand that any misrepresentation or falsification, including failure to report any college or university attendance, is sufficient cause for denial of admission and cancellation of enrollment and/or any credits earned. I further understand that all application materials submitted will be the property of Southwest College of Naturopathic Medicine and Health Sciences and cannot be returned. This information may be reproduced for use during my interview cycle.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please mail application and application materials to: Admissions Office  
Southwest College of Naturopathic Medicine & Health Sciences  
2140 E. Broadway Rd.  
Tempe, AZ 85282

**Application Checklist - Before mailing out your application have you:**

- Signed completed application?
- Enclosed check/money order for application fee?
- Enclosed Professional Resume?
- Enclosed Essays?
- Arranged for your transcripts to be sent directly from your college(s) to SCNM?
- Arranged for three recommendation forms and letters to be sent to SCNM?

Southwest College does not discriminate on the basis of disability, race, sex, religion, age, national or ethnic origin, sexual orientation, or marital status in the administration of educational policies, admission policies, financial aid, employment, or any other program or activity. It is Southwest College of Naturopathic Medicine & Health Science's goal to admit only the most qualified applicants. The College reserves the right to admit or reject applicants in the exercise of the College's sole discretion at any point in the admissions process. Southwest College is accredited by the Council on Naturopathic Medical Education, the accrediting agency for naturopathic colleges and programs in the United States and Canada. Students and graduates of naturopathic colleges and programs accredited or candidates for accreditation by CNME are eligible to apply for the Naturopathic Physician Licensing Examinations as administered by the North American Board of Naturopathic Examiners.