



School of Public Health

Dual MD/MPH Application

Please complete this form and return it, along with the requested materials, to Dr. Wayne LaMorte in the Talbot Building, 422E. Please print clearly.

Full Name	BU Email Address
BUID	Date of Birth
Country of Citizenship	Date of Application

Current year in BUSM: I II III

Intended MPH concentration

- | | |
|------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Biostatistics | <input type="checkbox"/> International Health |
| <input type="checkbox"/> Environmental Health | <input type="checkbox"/> Maternal and Child Health |
| <input type="checkbox"/> Epidemiology | <input type="checkbox"/> Social and Behavioral Sciences |
| <input type="checkbox"/> Health Law, Bioethics, and Human Rights | <input type="checkbox"/> Health Policy and Management |

Please submit the following, along with this completed form:

1. Your current resume
2. A statement of purpose written by you addressing the following areas:
 - a. Outline your relevant education and experience
 - b. Indicate your current professional career objectives
 - c. Indicate your reasons for pursuing an MPH in conjunction with your MD
 - d. How you intend to leverage the MD/MPH dual degree in your career
3. One (1) academic letter of recommendation from a BUSM Faculty member who has read your statement of purpose
4. A copy of your current BUSM transcript, provided by the BUSM Registrar
5. A letter from the BUSM Registrar verifying your enrollment and that you are in good standing at BUSM

If you have any questions please contact

Dr. LaMorte (wlamorte@bu.edu or 617-638-5073)

Anne Thorsen in Admissions (thorsena@bu.edu or 617-638-5001)

Applications will be reviewed and decisions distributed within four weeks of submission.