

Process and Steps for Completing the Application for Admission Form

All applicants are required to complete an OUHSC Application for Admission, pay all required fees, and provide an official transcript(s) from all higher education institutions that they have attended to the Office of Admissions and Records. The preferred application method is the on-line application at the following web site: <https://app.applyyourself.com/?id=uok-hs>. By utilizing the on-line application, you will not have to complete the application in one sitting, your application fees will be automatically calculated, and an initial residency status will be automatically determined for you.

All application materials should be mailed to:
University of Oklahoma Health Sciences Center
Office of Admissions and Records
Basic Sciences Education Building, Room 200
Post Office Box 26901
Oklahoma City, Oklahoma 73190

All application materials can be dropped off in person at:
OUHSC – Student Union (Oklahoma City Campus)
Office of Admissions and Records
Monday – Friday (8:00am – 4:00pm)
1106 N. Stonewall Avenue
Third Floor, Suite 306A

All applicants are encouraged to visit the Applicant Status View web site: http://ouhsc.edu/students/student_info/ApplicationStatus/ often during the application and selection process. The web site will give you up-to-date information regarding the receipt and completion status of all items received by the Office of Admissions and Records. Additional information provided to all applicants includes: current listing of applications on file, current residency status, external coursework received and processed, GPA calculations of all external coursework received and processed, and all test scores received and processed.

For **Non-Native Citizens** of the United States, please refer to the International/Non US Citizen Application Procedures – How To Apply web site: www.ouhsc.edu/admissions/International_Applicants_How_To_Apply.htm for requirements that may possibly apply to your application process. Note: Requirements vary depending on department requirements for TOEFL evaluations.

Applicants are encouraged to submit all official transcript(s), fees, and any applicable college supplemental materials within two weeks of submitting their application in order for their application to be processed in a timely manner.

Steps:

- 1) Visit the College or Department web sites to review program requirements.
- 2) Review the College or Department deadlines.
- 3) Complete the on-line Application Form at <https://app.applyyourself.com/?id=uok-hs> or complete this pdf. form on-line, print, and mail to the address listed above.
- 4) Pay all required fees (Application Fee \$40.00, College Processing Fees \$25.00*, and International Processing Fee \$25.00, if applicable).
- 5) Submit test scores.
- 6) Submit official sealed transcript(s) from all higher education institutions attended. All official transcript(s), enrollment verifications and/or class schedules should be mailed directly from the previous or current institution. Applicants should ensure the official transcript(s) contain all current enrollment, as well as all previous grades. In cases where current enrollment is not posted to the applicant's transcript, the applicant should submit proof of enrollment by providing enrollment verification(s) with their classes listed or a class schedule from the institution. If providing an enrollment verification or class schedule, the applicant will need to have an official transcript mailed to the Office of Admissions and Records as soon as final grades are posted. Any applicant with foreign credentials is required to have their transcripts or marksheets evaluated course-by-course through WES (World Education Services) at the following web site: <http://www.wes.org/>. The Office of Admissions and Records will **only** accept a WES credential evaluation.
- 7) Submit recommendation letters and/or list of references, if requested by College or Department. Refer to program requirements.
- 8) Submit Resume or Vitae and/or Statement of Career Goals, if requested by College or Department. Refer to program requirements.
- 9) Submit Observation Form, if requested by College or Department. Refer to program requirements.
- 10) Review the Applicant Status View web site: http://ouhsc.edu/students/student_info/ApplicationStatus/ to monitor the receipt and completion of all items submitted to the Office of Admissions and Records.

Additional Resources:

Main Web Site:	www.ouhsc.edu
Office of Admissions and Records Web Site:	www.ouhsc.edu/admissions/
Announcements:	www.ouhsc.edu/admissions/Welcome_Apply_Applicants.htm
Deadlines:	www.ouhsc.edu/admissions/PDF/ApplicationDeadlines2004.pdf
Major Code Sheet:	www.ouhsc.edu/admissions/MajorCodes.html
On-line Application (Preferred Method):	https://app.applyyourself.com/?id=uok-hs
Application Status View:	http://ouhsc.edu/students/student_info/ApplicationStatus/
Non-U.S. Citizen Application Instructions:	www.ouhsc.edu/admissions/International_Applicants_How_To_Apply.htm



Mail all Application Materials to the following address:

The University of Oklahoma Health Sciences Center
 Office of Admissions and Records
 P.O. Box 26901
 BSEB 200
 Oklahoma City, OK 73190-0001

Administrative Use Only

Student ID Number	Application Year

Name (please print your legal name)

Last Name (Suffix)	First Name	Middle Name
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Other Names (list any other names under which your records, transcripts, or test scores may appear and the date last used)

Date Last Used	Last Name	First Name	Middle Name
Date Last Used	Last Name	First Name	Middle Name
Date Last Used	Last Name	First Name	Middle Name

Social Security Number (Please enter United States social security numbers only) OU Assigned ID Number

- -	The Social Security Number is required in order for the University of Oklahoma Health Sciences Center to accurately process your records, transcripts, and test scores received from other institutions.	
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Student Information Primary Ethnic Group (Optional)

Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	Gender <input type="checkbox"/> Female <input type="checkbox"/> Male	Military Status <input type="checkbox"/> Active <input type="checkbox"/> Reserve <input type="checkbox"/> Retired Branch _____	<input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Pacific Islander/Native Hawaiian <input type="checkbox"/> White Ethnicity _____
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Date of Birth Place of Birth

/ /	City	State	Country
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Citizenship

Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No Country of Citizenship _____	Non U.S. Citizens: Do you hold a Permanent Resident Visa in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	Naturalized U.S. Citizen? <input type="checkbox"/> No <input type="checkbox"/> Yes Nat. No. _____
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Current Mailing Address (Home Address) Home Phone

Street	City,	State	Country	Zip Code	()
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Permanent Mailing Address (Address of Legal Residence) Permanent Phone

Street	City,	State	Country	Zip Code	()
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Email Address Work Phone Cell Phone Fax

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Personal Information

Application for Admission Continued

Applications

List all the areas you are officially applying to for admission. *Each listing may be subject to additional College Processing Fees.

Application Information

1	Major Code	Major Description	Application Term/Year
	Major Code	Major Description	Application Term/Year
	Major Code	Major Description	Application Term/Year
	Major Code	Major Description	Application Term/Year
	Major Code	Major Description	Application Term/Year

Administrative Use Only

Application Number	Checklist Fees
Application Number	<input type="checkbox"/> Checklist <input type="checkbox"/> Fees
Application Number	<input type="checkbox"/> Checklist <input type="checkbox"/> Fees
Application Number	<input type="checkbox"/> Checklist <input type="checkbox"/> Fees
Application Number	<input type="checkbox"/> Checklist <input type="checkbox"/> Fees

High School Information/GED

If high school course work satisfies the General Education foreign language or computer requirement, an official high school transcript must be provided.

Graduation Date	High School where diploma was received	City, State	GED <input type="checkbox"/> Yes	Ext. Org. ID <input type="checkbox"/> Checklist <input type="checkbox"/> Education
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Colleges or Universities Attended (List each institution once. Provide FICE Code if known.)

List all colleges, universities, and professional schools attended since leaving high school. It is your responsibility to provide official and complete transcripts from each institution attended. Failure to list any higher education institution will result in expulsion from the University.

Education Information

1	FICE Code	Name of Institution			City, State	Ext. Org. ID <input type="checkbox"/> Checklist <input type="checkbox"/> Education
	From Date	To Date	Final Term/Year Attended	Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Received	
2	FICE Code	Name of Institution			City, State	Ext. Org. ID <input type="checkbox"/> Checklist <input type="checkbox"/> Education
	From Date	To Date	Final Term/Year Attended	Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Received	
3	FICE Code	Name of Institution			City, State	Ext. Org. ID <input type="checkbox"/> Checklist <input type="checkbox"/> Education
	From Date	To Date	Final Term/Year Attended	Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Received	
4	FICE Code	Name of Institution			City, State	Ext. Org. ID <input type="checkbox"/> Checklist <input type="checkbox"/> Education
	From Date	To Date	Final Term/Year Attended	Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Received	
5	FICE Code	Name of Institution			City, State	Ext. Org. ID <input type="checkbox"/> Checklist <input type="checkbox"/> Education
	From Date	To Date	Final Term/Year Attended	Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Received	

Administrative Use Only

Ext. Org. ID	<input type="checkbox"/> Checklist <input type="checkbox"/> Education
Ext. Org. ID	<input type="checkbox"/> Checklist <input type="checkbox"/> Education
Ext. Org. ID	<input type="checkbox"/> Checklist <input type="checkbox"/> Education
Ext. Org. ID	<input type="checkbox"/> Checklist <input type="checkbox"/> Education
Ext. Org. ID	<input type="checkbox"/> Checklist <input type="checkbox"/> Education

Application for Admission Continued

Test Scores

See College or Department program requirements. Please submit your official test scores to OUHSC (FICE Code 005889)

Test

GRE	Date of Test	DAT	Date of Test	PCAT	Date of Test	TOEFL	Date of Test	<input type="checkbox"/> Checklist <input type="checkbox"/> Test Results
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Licenses and Certifications

Licenses Certifications

1	Name of License or Certificate	Issue Date	License Number	Issued By	Expiration Date	Administrative Use Only	<input type="checkbox"/> Checklist <input type="checkbox"/> Lic/Cert
2	Name of License or Certificate	Issue Date	License Number	Issued By	Expiration Date		<input type="checkbox"/> Checklist <input type="checkbox"/> Lic/Cert
3	Name of License or Certificate	Issue Date	License Number	Issued By	Expiration Date		<input type="checkbox"/> Checklist <input type="checkbox"/> Lic/Cert

Residency (Residency will be initially determined based upon the information provided in your application.)

Residency Policy

<p>The University of Oklahoma Health Sciences Center is a state-supported institution of higher education supported by legislative funds derived from State of Oklahoma tax revenue. As a state tax-supported institution, the University gives preference in tuition to residents of the State of Oklahoma.</p> <p>The University's definition of the term "resident" may be different from the definitions developed by other, non-university agencies. The University does not recognize declarations of resident status made by other agencies. Thus, a person who is an Oklahoma resident for tax or voting purposes is not necessarily a resident for University of Oklahoma Health Sciences Center tuition purposes.</p> <p>Resident status is granted to financially independent adults who are permanently residing in Oklahoma and who have been physically and continuously present in the State of Oklahoma for at least one calendar year prior to the first day of class attendance at any Oklahoma institution of higher education; and who, during this one-year period, resided in Oklahoma for some reason other than primarily to attend classes at a post-secondary educational institution.</p>	<input type="checkbox"/> Addresses <input type="checkbox"/> High School <input type="checkbox"/> Higher Ed <input type="checkbox"/> RESOK <input type="checkbox"/> NONOK <input type="checkbox"/> INTL <input type="checkbox"/> Term/Year
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Affirmation and Signature

Notification to Students: The University of Oklahoma Health Sciences reserves the right at all times to modify admission requirements and to discontinue, modify, or otherwise change its degree programs when it determines it is in the best interest of the University to do so.

The University does not discriminate on the basis of race, color, national origin, sex, age, religion, disability, political beliefs, or status as a veteran in any of its policies, practices, or procedures. This includes, but is not limited to, admissions, employment, financial aid, and educational services. The University of Oklahoma Health Sciences Center is in compliance with all applicable Federal and State laws and regulations.

I hereby waive my right of access to recommendation letters in my file. I understand that my choice to waive or not to waive access to recommendation letters will not affect the admission decision. Yes – I waive my right No – I do not waive my right

I understand that all records of my academic performance, at other institutions, submitted to the University of Oklahoma Health Sciences Center become the property of the University and will not be returned to me.

I affirm by my signature that I have furnished all information requested in this application. I understand that submitting any false information to the University, including but not limited to, false transcripts or any information contained on this form, or withholding information about my previous academic history will make my application for admission to the University, as well as any future applications, subject to denial, or will result in expulsion from the University.

Signature (Required)	Date	<input type="checkbox"/> Yes, I authorize the processing of my fees by Credit Card. Name on Front of Card:	
<input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover	Card Number	Expiration Date	Credit Card Approval # (Office Use Only)

Administrative Use Only

Total amount of fee processed <input type="checkbox"/> Application Fee (\$40.00) <input type="checkbox"/> College Process Fee(s) _____ <input type="checkbox"/> International Processing Fee (\$25.00)	<input type="checkbox"/> Check <input type="checkbox"/> Int'l Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit Card	Processing Notes <input type="checkbox"/> Application Summary <input type="checkbox"/> Proof - Audit
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