



JOHNS HOPKINS  
UNIVERSITY

POST-BACCALAUREATE PREMEDICAL PROGRAM

**Acknowledgement Form**  
**Application Year 2022-2023**

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**Applicant Name (Printed)**

Print your name on the line above, read the statement then sign and date at the bottom. Please email a PDF copy of the completed form to: [postbac@jhu.edu](mailto:postbac@jhu.edu).

Acknowledgement Statement:

I understand that my application will not be considered until all required items listed in the “Application Instructions” have been received. It is my responsibility to be sure that these items are received by the Post-Baccalaureate Premedical Program Office by the deadline. I must inform this Office of any changes to my mailing and e-mail addresses, and telephone numbers. I also understand that the Post-Baccalaureate Premedical Program reserves the right to request additional information from applicants, if needed, to assess their candidacy for admission.

My signature below certifies that all of the information contained in my application is factually correct, honestly presented, and contains no significant omissions. If at a later date it becomes clear that this is not so, I agree that Johns Hopkins University may revoke any offer of admission it makes to me or dismiss me from the University.

I am aware that admission to the Post-Baccalaureate Premedical Program does not constitute admission to a degree program. In order to receive the post-baccalaureate certificate, I must successfully complete a minimum of 24 approved credits, be enrolled full time through fall and spring semesters, successfully complete one Medical Tutorial and the course Introduction to Clinical Medicine. In order to receive the Premedical Committee Letter of Evaluation, I must meet requirements from the Committee including, but not limited to, student conduct standards, advising participation, submission of documents by deadlines and GPA standards. Committee requirements and deadlines will be discussed in detail at orientation and program meetings.

If I am admitted to study at Johns Hopkins University, I agree that I will honor the University’s academic and ethical standards and that I will abide by all requirements established by the University concerning academic progress, health, and conduct. I agree that the University may dismiss any student whose academic standing is lower than a 2.5 grade-point-average, or who does not enroll in all courses as determined by the Program, or whose conduct jeopardizes the community or is otherwise unacceptable.

Applicant’s Signature: \_\_\_\_\_

Date: \_\_\_\_\_