



BLACKWELL MEDICAL SCHOLARS

First-Year Blackwell Medical Scholars Program Instructions 2011-2012



Elizabeth Blackwell Medical Scholars Program

Deadline, January 1

The Elizabeth Blackwell Medical Scholars Program at Hobart and William Smith Colleges is designed for exceptional high school seniors who wish to attend medical school and are U.S. citizens. Blackwell Scholars are awarded a full-tuition scholarship to attend Hobart and William Smith Colleges. In addition, each Blackwell Scholar is reserved a seat at SUNY Upstate Medical University College of Medicine (Syracuse) the fall semester following graduation pending successful completion of the Blackwell requirements and an MCAT score of 30 or higher.

Upon graduation from Hobart or William Smith, Blackwell Medical Scholars must have a GPA of 3.5 or better in their science courses, have successfully completed an internship/ shadowing program at Geneva General Hospital or related sites, have completed any enrichment activities provided by SUNY Upstate Medical University, and have remained in good standing at the Colleges, in order to retain their seat in medical school at SUNY Upstate Medical University College of Medicine.

To retain the full-tuition scholarship from Hobart and William Smith, awardees must maintain a GPA of at least 3.0 each semester at Hobart and William Smith Colleges.

Applicants for the Blackwell Medical Scholars Program must be U.S. citizens and must meet at least one of the following three criteria:

- 1) **be from a rural background.**
- 2) **be from an underrepresented minority group.**
- 3) **be the first generation in family to attend college.**

In addition, applicants must have minimum SAT scores of 1250 (critical reading and math only) or an ACT Composite score of 28, a high school grade point average of 90 or higher (or equivalent on a 4.0 scale), must agree to come to an on-campus program and interview in February, and have demonstrated a commitment to a career in medicine. Please note: Applicants who wish to be considered for the Blackwell Medical Scholarship must submit standardized test scores (SAT or ACT).

Please return all required materials to:

Elizabeth Blackwell Medical Scholars Program

Hobart and William Smith Colleges, Office of Admissions, 629 South Main Street, Geneva, N.Y. 14456

Phone: (800) 852-2256 or (315) 781-3622; Fax: (315) 781-3914



BLACKWELL MEDICAL SCHOLARS

Application Form 2011-2012



Elizabeth Blackwell Medical Scholars Program

Deadline, January 1*

Name _____

Home Address _____

City, State, Zip Code _____

Home Phone _____

E-mail Address _____

Current School _____

I am applying for the Blackwell Medical Scholars Program because I am a U.S. citizen, I meet the academic criteria, and I meet at least one of the criteria listed below:

- I am from a rural community
- I am from an underrepresented minority
- I am the first generation in my family to attend college

Essay: In the space provided on the back or on a separate sheet, answer the following:

“You have described yourself as being from a rural community, from an underrepresented minority, and/or the first generation in your family to attend college. What effect has this had on you and on your desire to become a physician?” Also, please tell us how you first learned of the Blackwell Medical Scholars Program.

Letter of recommendation: Please have someone who can describe your suitability for a career in medicine provide a letter of recommendation. (See Recommendation form)

Complete all admissions application materials and submit by January 1. Please note: Applicants who wish to be considered for the Blackwell Medical Scholarship must submit standardized test scores (SAT or ACT).

*** If you are applying for Admission under the Early Decision I program, all materials required for the Blackwell Medical Scholars Program must be submitted by November 15.**

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BLACKWELL MEDICAL SCHOLARS

Recommendation Form 2011-2012



Deadline, January 1*

TO THE APPLICANT:

Applicant Name _____

Home Address _____

City, State, Zip Code _____

High School _____

E-mail Address _____

Candidate's Waiver: I have requested the person specified below to write a confidential recommendation and show by my signature that I waive my right of access to this recommendation.

Signature _____

TO THE RECOMMENDER:

- The student named above has submitted an application for consideration as an Elizabeth Blackwell Medical Scholar at Hobart and William Smith Colleges. It will be most helpful to our selection committee if you, as someone who is well acquainted with this student, would critically assess his or her ability as it relates to a career in medicine.
- We appreciate your efforts on this student's behalf, and ask that you return this form postmarked by **January 1.***
- Please feel free to use the reverse side of this form or to attach a separate sheet.

***If this student has applied under the Early Decision I program at Hobart and William Smith, this recommendation must be submitted by November 15 for consideration.**

Please print clearly or type.

Recommender's Name _____

Address _____

City, State, Zip Code _____

Phone Number _____ E-mail Address _____

Relationship to Applicant _____

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