



**UNIVERSITY OF SANTO TOMAS
FACULTY OF MEDICINE AND SURGERY**

ST. MARTIN DE PORRES BUILDING
ESPAÑA MANILA, PHILIPPINES



UNIVERSITY OF LEEDS

**MASTER OF PUBLIC HEALTH INTERNATIONAL
APPLICATION FORM**

ACADEMIC EXPERIENCES

**ALL CAPS preferred for this field*

Previous School (primary, secondary, tertiary)	Year Begun	Year Ended	Major	Degree Award	Date Awarded

Bar / Board Examination Score _____

Have you ever applied to this University? Yes No If YES, when? Sem _____ Year _____

Have you ever attended this University? Yes No If YES, when? Sem _____ Year _____

List of scholarships, fellowships, academic awards, honors, etc., received since high school.

If you have not pursued your education from date of graduation from college to present, list last three positions held.

Employer (Name of Company)	Location	Position	Year Begun	Year Ended

ADMISSION ESSAY QUESTION

Address the following question on a separate sheet and attach it to this application form.

Write about your intended research in not less than 500 words. Set out the problem that you want to examine or the central question that you wish to address and briefly explain the broad background against which you will conduct your research. Include a brief overview of the general area of study within which your proposed research falls.

I certify that I have personally filled out this form and that the information, to the best of my knowledge, is complete and accurate. I understand that all credentials submitted in support of this application become the property of the University and are not returnable. Therefore, I hereby apply for admission to the UST Faculty of Medicine and Surgery, Master of Public Health International. I agree to abide by its school policies.

Signature over printed name _____

Date _____

DO NOT FILL UP, FOR OFFICE USE

RECOMMENDATION

PROBATIONARY Status

DEGREE/REGULAR Status

TO TAKE AN ENTRANCE TEST

FOR INTERVIEW

NOT ADMITTED

Reason/s _____

General Average
(of recent T.O.R.) _____

Comment/s _____

Dean/Faculty Secretary _____

YOUR APPLICATION IS VALID ONLY FOR THE SEMESTER STATED

