



American University of Beirut  
Admission to  
**First Year Medicine**



## Instructions for Applying for Admission to First Year Medicine

- It is preferable that all items, except number 24–28 be typed. If handwritten, please use block letters.
- The applicant's name exactly as it appears in item 1 will be used on all documents issued by the University such as degrees and transcripts of record.
- The information which is requested in Arabic (in items 1 and 3) is requested only from Arabic speaking applicants.
- The application must be completed by the applicant himself or herself and must reach the Office of Admissions by mid-January.
- Applicants must fill in the application and ask their colleges or universities to send to the Office of Admissions an official copy of their transcripts directly, and at least two letters of recommendation.  
Applicants who have studied, or are currently studying, at the American University of Beirut must obtain the required transcript from the Office of the Registrar and include it in their application.
- An application will not be forwarded to the Admissions Committee of the Faculty of Medicine for consideration if it does not include the following:
  - a) A recent, passport size, colored photograph of the applicant
  - b) A photocopy of the applicant's identity card or passport
  - c) A non refundable application fee of LL120,000 or its equivalent in US Dollars
  - d) An official transcript (The name on the transcript of record should be the same as that on the application)
  - e) Two letters of recommendation which must be sent directly to the Office of Admissions
- Preliminary acceptance to the Faculty of Medicine will be issued by mid March and will be conditional upon completion of the BS, MS, BA, or MA degrees.
- To secure their positions, students accepted to the Faculty of Medicine will be requested to pay three thousand dollars (USD3,000) non refundable deposit toward their registration within 30 days from the date of acceptance.

## Important Notes

- Accepted students bear full responsibility for financing their education at the American University of Beirut (AUB).
- It is the responsibility of applicants to register for, and take, the Medical College Admission Test (MCAT), no later than January of the year they plan to join the Medical School. Applicants must arrange to have the MCAT center forward all their scores directly to the Office of Admissions. (The MCAT may be taken twice only. If taken twice, the higher score is considered.)
- AUB undergraduate applicants must be in their senior year. The cumulative average of 70 credits or more at the time of application, should be equal to or higher than 75% (or its equivalent from other universities) and should be maintained as such till the end of the academic year.
- Applicants from graduate programs at AUB should successfully complete all the requirements of the programs for graduation with the Master's degree, including thesis defense, prior to the start of the academic year for the Medicine I Class. Applicants from the Faculty of Medicine Graduate Program in the basic medical sciences must, in addition to meeting all the requirements for graduation with the master's degree, complete at least 10 graduate, non-medical, course credits.
- Recommendations, transcripts of record and all other documents submitted to complete an application for admission are the property of AUB. Applicants, whether accepted or not, may not claim them back.
- Admission is valid only for the academic year for which a student applies. If an applicant is accepted and for some reason does not register, then his or her admission is forfeited. To join the Faculty of Medicine at some later time, the student will have to reapply, present complete documents, and compete with the new applicants.



Number: \_\_\_\_\_  
For office use only

Detach and mail to AUB

# Application for Admission to First Year Medicine American University of Beirut, Office of Admissions, College Hall, Beirut, Lebanon

Paste recent colored  
passport-size photograph.  
Do not staple.

<b>Year applying for:</b>	<b>Deadline:</b>	<b>MCAT</b>
<input type="checkbox"/> August 2016	January 15, 2016	January 2016
<input type="checkbox"/> August 2017	January 15, 2017	January 2017
<input type="checkbox"/> August 2018	January 15, 2018	January 2018

**All applicants are considered on the basis of their qualifications regardless of race, color, sex, disability, religion, age, national or ethnic origin.**

1. Full legal name: Mr./Ms. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First Middle (or father's name) Suffix (Jr., Sr.)

In Arabic, if applicable: \_\_\_\_\_  
[Full name as it appears on passport or identity card]

2. Mother's full maiden name: \_\_\_\_\_  
In English

3. Married name for women applicants: \_\_\_\_\_

4. Maiden name for women applicants: \_\_\_\_\_

5. Mailing address: \_\_\_\_\_  
mandatory [preferably not school address] Building [Complete valid home address is mandatory: PO Box alone is not sufficient]

\_\_\_\_\_  
Street PO Box (not AUB box)

\_\_\_\_\_  
County (Mohafazat) City State Zip Code Country

Telephone (home): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (cell): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Country code Area code Number Country code Area code Number

Fax: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Country code Area code Number

6. Permanent address: \_\_\_\_\_  
Building [Complete this item only if different from address in no. 5]

\_\_\_\_\_  
Street PO Box (not AUB box)

\_\_\_\_\_  
County (Mohafazat) City State Zip Code Country

Telephone (home): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (cell): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Country code Area code Number Country code Area code Number

Fax: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Country code Area code Number

7. Email address, Application status and admission decision are notified by email, it is very important to clearly write email address(es) of applicant and/or parent:

\_\_\_\_\_ @ \_\_\_\_\_  
Login name

8. Gender:  Male  Female

9. Date of birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (e.g., 27-JUN-1995)  
Day Month Year

10. Nationality:  Lebanese  Other, \_\_\_\_\_  
specify

11. Country of birth: \_\_\_\_\_  
[as on passport or ID card provided with this form]

12. Passport information, if available:

Passport no.: \_\_\_\_\_ Expiration date: \_\_\_\_\_

13. Marital status:  Single  Married  Other, \_\_\_\_\_  
specify

14. List the full name(s) of mother, father, grandparent(s) who graduated from AUB:

_____ / _____ / _____ / _____			
_____ / _____ / _____ / _____			
_____ / _____ / _____ / _____			
_____ / _____ / _____ / _____			
Full name	Relationship to you	Degree	Year of graduation

15. List the full name(s) of mother, father, grandparent(s) currently employed by AUB:

_____ / _____ / _____ / _____			
_____ / _____ / _____ / _____			
Full name	Relationship to you	Department	ID number

16. How do you expect to meet the cost of tuition and other expenses? Check all that apply:

Parents  Myself  Sponsor  Other, \_\_\_\_\_  
specify

Name and address of parents or sponsor:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

17. if you are a U.S. citizen or permanent resident, please provide your Social Security Number SSN:

\_\_\_\_\_

18. Will you be applying for financial aid from AUB?  Yes  No

19. Government secondary school certificate (or high school diploma) held. Please indicate type of certificate (e.g., literary, scientific).

\_\_\_\_\_ / \_\_\_\_\_  
Name and type of certificate in English Date received

\_\_\_\_\_ / \_\_\_\_\_  
Name and type of certificate in English Date received

If Advanced Level GCE, IB, or Advanced Placement, please specify subjects passed, level, and dates.

**20. List all colleges/universities attended with the dates of attendance:**

Name of college/university	Location (city and country)	From (Month/Year)	To (Month/Year)	Date of graduation and Degree
_____ / _____	_____ / _____	_____ / _____	_____ / _____	_____ / _____
_____ / _____	_____ / _____	_____ / _____	_____ / _____	_____ / _____
_____ / _____	_____ / _____	_____ / _____	_____ / _____	_____ / _____

**21. Proficiency in languages:**

	Writing			Reading			Speaking		
	Exc.	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair
<b>a. English</b>									
<b>b. Arabic</b>									
<b>c. French</b>									
<b>d.</b>									

**22. Were you previously registered at AUB?**  Yes  No

If yes: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Faculty Academic year ID number

**23. Emergency contact,** write below addresses of two persons to be contacted in case of emergency:

**1.** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Name Relationship Building

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Street PO Box City Country

Telephone (home): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (cell): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Country code Area code Number Country code Area code Number

**2.** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Name Relationship Building

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Street PO Box City Country

Telephone (home): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (cell): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Country code Area code Number Country code Area code Number

**24. Do you have any physical disabilities?**  Yes  No

If yes, please describe. The information is requested only to enable the University to better serve students.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**25. List your most important non-scientific extracurricular activities and how you use your leisure time.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



## Statement of Policy

- The American University of Beirut (AUB) is an institution of higher learning dedicated to the education of the youth of the Middle East, the service of its peoples, and the advancement of knowledge.
- AUB has high academic standards. Its degrees are recognized internationally, and in order that they may continue to be so recognized, they must be based upon satisfactory completion of the full requirements set forth in the university catalogue.
- AUB is dedicated to cultivating high moral and ethical values.
- AUB encourages freedom of thought and expression to be shared respectfully and responsibly.
- AUB believes that every member of the student body, the faculty, the staff and the administration has the right to individual self-expression, and will not take any action to infringe on the proper exercise of this right. Inherent in this right is the obligation to show respect and tolerance for peaceful dissent and the demonstration of opposing points of view.
- All members of AUB—faculty, administration, students, and staff—are expected to conduct themselves in accordance with the spirit of this declaration of policy, the regulations of the University, and the laws of the Republic of Lebanon whose hospitality gives the University the privilege of carrying out its educational activities within the framework of academic freedom.

## Statement of Student Conduct

Students at AUB enjoy a position of privilege and responsibility and are held in high esteem by the community. They have challenging and creative roles to fulfill, and this implies certain obligations, which bear upon their conduct in the University and in the community at large.

It is the policy of AUB to maintain a minimum of regulations that are necessary for governing student conduct and for the orderly functioning of the institution. These regulations are issued from time to time by the dean of students and by other university officers. In all other matters AUB students are expected to exercise their freedom with dignity and responsibility, but in no case should their actions infringe on the rights of others or disrupt the normal functioning of the University.

Infraction of specific regulations or norms of conduct expected of university students may be the cause for disciplinary action.

**Office of Admissions  
American University of Beirut**

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Fax: +961-1-750775  
Email: [admissions@aub.edu.lb](mailto:admissions@aub.edu.lb)  
Web: [www.aub.edu.lb/admissions](http://www.aub.edu.lb/admissions)  
Apply Online: [www-banner.aub.edu.lb/pls/weba/  
BWSKALOG.P\\_DISPLOGINNON](http://www-banner.aub.edu.lb/pls/weba/BWSKALOG.P_DISPLOGINNON)

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