University of Belize Education Empowers a Nation

Office of Admission

University Avenue of Belize Hummingbird, P.O. Box 340





Application for Admission to the University of Belize School of Medicine (UBSoM)

The University of Belize welcomes your application to one of our 50+ programs!

Your application is the first step to joining the UB Black Jaguar family. Please take a moment to carefully look over your application form and instructions. It is important that you fill in all areas accurately, completely and legibly for a seamless process and timely admission response. If you have any related questions, kindly contact us at the above telephone numbers or email address.

Equal Opportunity for all Applicants: The University of Belize does not discriminate against applicants based on race, color, language, physical ability, age, marital and family status, gender, sexual orientation, gender identity, health status, place of residence, economic and social situation, religion, political beliefs, nationality, ethnic or social origin.

STEP 1: Complete Your Application Form

STEP 2: Gather Your Supporting Documents

STEP 3: Submit Your Application

Application Process

- 1. Kindly use the checklist below to prepare your application package. You may either apply online or paper-based, not both.
- 2. The following items are required whether you are applying online or paper-based. To apply online, please visit our website at www.ub.edu.bz and follow the instructions.
- 3. All applicants are required to pay the application fee and submit their supporting documents. Photocopies of all supporting documents must be certified by a Justice of the Peace or Apostilled for International Students. Local Students are required to have a Justice of the Peace or UB Records & Admissions personnel certify all photocopied supporting documents.

Application Checklist: Kindly review the following list of items required with your application. Select only those applicable to your situation. "Certified copy" of documents refer to documents that are authenticated by a Justice of the Peace (JP).

- Read pages 1 and 2 of this application.
- All prospective UB School of Medicine students are required to complete either this or the online form.
- Official Transcript(s): Transcripts *may* be submitted directly from your institution to UB at: etranscripts@ub.edu.bz or you may submit the hardcopy in a sealed envelope from your institution.
- $\begin{tabular}{l} \blacksquare & Where applicable, one certified copy of any standardized test you have taken: For e.g. CXC, SAT, ACT, CAPE, MCAT test scores. \\ \end{tabular}$
- □ For students for whom English is not their first language, please contact the Regional Language Center for testing (TOEFL or IELTS).
- □ Two (2) completed UB Recommendation Forms PDF Fillable Recommendation Forms are available on our website and *may* be emailed directly from the Recommenders to UB at: etranscripts@ub.edu.bz
- Associate Degree or Bachelor Degree: Copies of non-UB degrees should be certified. Applicants who are currently enrolled are required to submit this later.
- One certified copy of your birth certificate or the biometric page in your passport.
 - Applicants with Permanent Resident status must submit a certified copy of the biometric page of the Passport along with the page that bears the Immigration Department PR Stamp.
- Certified copy of your Social Security Card.
- Certified copy of one (1) passport-size photograph.
- Complete the Educational Background Form: Applicants of Non-traditional Secondary Schools, Adult Continuing Education program or alternative schooling must complete this Form which is included in the application packet.
- $\ \square$ You may include certified copies of other qualifications that may support your application.
- Pay a non-refundable application fee of Bz\$200.00 or US\$100.00: Cash payments cannot be mailed. Payments may be made at any UB cashier in Belize City, Belmopan, or PG campus. Payments may also be made at any Atlantic or Belize Bank. Cheques must be made payable to the University of Belize. International Students are required to request the Credit Card Authorization Form to complete payment. Always present your UB Student ID Number when making a payment.
 - International Students are required to visit our University website at www.ub.edu.bz >> Admission>> International Students to review the additional admission requirements for foreign students.
 - Applicants who took courses through UB's PUED/ODL/ACE program are required to reapply for admission.

Once you have completed the above checklist, you are ready to submit your application package including your receipt of payment. Please place your application in an envelope addressed to the Admission Office, University of Belize. Please note that incomplete packages may delay your application processing time.

Kindly note that the University of Belize cannot assume responsibility for information not disclosed in this application package.

ADMISSION DEADLINES

The application deadlines will be published on a yearly basis, but will most likely fall either in May or June.

NB: deadline for the submission of applications for the first intake has not been set as yet.

Admissions at The University of Belize

Past UB Students and Transcript Submission

Past University of Belize students (from the year 2000 – current) do not need to provide their UB Transcript. Students from the University College of Belize, Belize Technical College, Belize Teacher's College, Bliss School of Nursing, and Belize College of Agriculture must however provide their official transcript of the institution attended. These transcripts can be requested through any UB Records Office or email records@ub.edu.bz

UB Regional Language Centre (RLC)

The University of Belize's Regional Language Centre (RLC) offers the Certificate in English as a Second Language (CESL), customized courses for other languages, and language examinations in English and Spanish. The RLC also provides translation services in English, Spanish and Mandarin. The Regional Language Center can be reached at telephone number 822-1000 extensions 165 or 456 or via email at ric@ub.edu.bz

UB School of Medicine Qualifying Entrance and Scholarship Examination (QESE)

Please see the attached UBSoM Admission Guidelines. This examination is be taken by all applicants who do not meet the academic entry requirements and the Belizean applicants who want to compete for the UBSoM Academic Scholarship.

Admission Interviews

The University of Belize School of Medicine will require applicants to attend an interview. Applicants will be notified in advance.

Response to Application (Admission Response Letter)

The UBSoM is committed to responding to all applicants within a reasonable time. Response Letters are sent through email to the address provided on the application. Applicants with invalid or incorrect emails might receive a late response. We, therefore, urge applicants to complete the application process accurately and completely and always check their Spam and Junk emails before following up on a response. The UBSoM may issue conditional acceptance letters to students. In this circumstance, the acceptance to the University is conditional pending the successful completion and submission of the completed Transcript, a certified copy of the Diploma or Degree or official results of the QESE or MCAT.

If you attended a non-traditional (Evening Division or Home School) or foreign institution, you are required to complete and submit the Educational Background Form along with your application to the University of Belize.

Deferral of Acceptance

Upon acceptance to the UBSoM, a student may postpone his/her entry for up to one Academic Year. For example, if the student was accepted for August 2024, he/she may choose to defer to August 2025 or January 2018 (if the program is open for admission). To defer, the student is required to complete a Request for Deferral Form, pay the processing fee and submit the form along with the payment receipt to the Admission Office one semester in advance. The processing fee is payable at any UB Accounts Receivables Cashier, Atlantic, or Belize Bank.

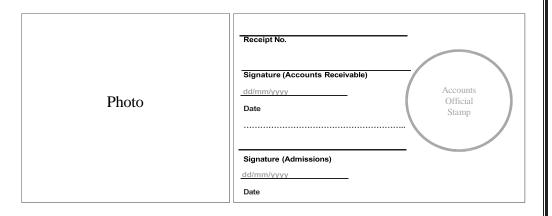
Change in Information on Application

If you wish to change any information on your application, just send us an email at <u>ubsomadmissions@ub.edu.bz</u> requesting the Change of Information on the Application Form.

Following Up on Admission Status

To follow up on your application, kindly call the Admission Office at 822-1000 or email us at ubsomadmissions@ub.edu.bz. You may present your UB Student ID Number for faster service.

Thank you for applying to the University of Belize



Section 1- Biographical information

Full Name:			
Legal Surname(s)	Legal First Name	2	Middle Name(s) (if any)
Former/Maiden Name (If any):	v	Vas your Name Changed:	Yes () No ()
Date of Birth: dd/mm/yyyy		ender: Male / Female or the Faculty of Health Science	es)
Citizenship Status:	Religious Affilia	ntion:	
Ethnicity (For e.g., African, Asian, Creole,	, Garinagu, Hispanic, Maya	n, Mestizo, etc.):	
Other (please specify):	Email Address:		
Section	2 – Home Addre	ess & Contact	
Permanent Address: Street Village/Town	/City District or Sta	te Zip/Postal Code	Country
Mailing Address: Street Village/Town/City	District or State	Zip/Postal Code Country	,
Telephone Number(s):	Email A	Address	
☐ I hereby take responsibility for updatin	ng the Records Office should during my tenure at the U	•	t number and details change
Section	on 3 – Admissior	Information	
Anticipated Star Year: 20	Select your Semester:	January 20	August 20
Intended Program: You may refer to	the Program Listing	_	Full-Time 🗆
*Second Choice Program (Optional): *(In instances where there are no spaces aver requirements, your		am or you do not meet your pr	rogram-specific admission
Se	ection 4 – Applica	tion Type	
Select the most appropriate application t	ype:		
☐ International Student: You are a citizen	of a country other than Bel	ize.	
Past UB Student: UB ID#			
☐ UB Staff Member: YES ☐	NO 🗆		

Section 5 – Educational Background				
This is my first time applying to UB: YE	S 🗆 NO			
List <u>all</u> secondary and tertiary institutions with the most re		Dates Attended From To	*Diploma or certificate received or expecting	
Name of Institution	City/Country	month year month year		
*Diploma Leaving Ce	ertificate, CXCs, GCF O-Lev	/els, etc. If none received, v	vrite "None "	
z.p.o.na, zoanng oo				
Section	on 6 – Standard	ized Exams		
Select the Standardize Exam and write the year CAPE, Year: CXC, Ye	ar when you took or will ear:, \sum MCA	be taking the Exam(s): aT, Year:,[QESE, Year:	
☐ IELTS (7.0 on each band), Year:		☐ TOEFL (94-1	01), Year:	
Section	7 - Financing	Your Program		
The following information is being requested necessary. Kindly complete this section to the our Non-Discrimination Policy and this section	best of your knowledge.	Be informed that all appl	icants are protected under	
Employment Status: Employed \(\square\)	Unemployed Self-em	ployed Studen	nt.	
Employer's/Company's Name:	How long	have you been employed	at this company	
How will you finance your education at UB	: Self	Parents Spor	nsor Scholarship	
What is the source of finance: Bank Sav	ings Salary Deduct	ions ☐ Sale of Asset	s Loan	
If you are being sponsored, does your prima	ary sponsor have other	dependents? Yes	No□ Uncertain □	
What financial assistance or surety has the	sponsor confirmed to d	ate?		
Sponsorship Commitment Letter \(\square\)	Verbal Agreement	Other:		
Kindly provide with your application, proof of Letter of Intent to Pay/Affidavit of Support or				
Section 8 – E	Emergency Con	tacts - Mandato	ory	
This information is mandatory in the event the section. International students must provide at	.	**	quired to complete this	
Contact's Full Name:	Relationship:	Telep	hone Number:	
Section 9 –	Information Re	lease Agreemer	nt	
Please provide the details of persons to whom not be released to individuals not listed by you			e released. Information will	
Full Name:		Telephone Number:		
Relationship:	Parent/Guardian Emai		icant under 18 years of age)	
Section 10 – How Did You Learn About UB				
Where did you first learn about the University of Belize?				
High School Career Day	Radio/TV	Belize	ouTube Channel Agric. &Trade Show Place of Employment	

Section 11 – Medical History

The University of Belize expects al part of your medical record. Please around current treatment and prescr other information about your health Professors or Lecturers must be info	include any medi riptions, as well as a, with anyone wit	cal information the syour immunizate thout your writter	nat is pertiner ion records. Un permission.	nt to your ongoing care JB does not share this in In circumstances where	– particularly nformation, or any
Do you have a special need? If you would like the Admissions conformation on a separate sheet of p		No □ der any additiona	l information	or special needs, please	e provide that
What allergies do you have?	Penicillin:	Aspirin: \square	Latex: □	Morphine: \square	Other:
Are you fully vaccinated?	Fully Vaccinate	d Fully	Vaccinated E	Except for COVID-19 V	Vaccine 🗆
	Section 12	2 – Persona	al Staten	nent	
Please assist us in learning more write a statement of purpose (ess include any extra-curricular invothis page.	ay) outlining you	ır accomplishme	ents, career a	ambition and profession	onal goals. Please
Section	n 13 – Cond	duct. Certif	ication a	& Signature	
Applicant must submit a police re		•			4 years.
Have you ever been involved in an Yes No	ny disciplinary p	roblems involvii	ng education	al institutions, employ	ers or the police?
Have you ever committed any aca	ıdemic miscondu	ct at any institu	tion you wer	e enrolled in? Ye	es 🗆 No 🗆
I certify that all information given falsifying information may result or continuation at the University, bills, endeavor to excel, and abide specifically.	in a revocation of I agree that as a	of an admission of student, I will a	offer, making attend the of	g me completely inelig ficial New Student Ori	ible for admission entation, pay my
Applicant's Signature:			Date:	mm / dd / yyyy	
Parent's/Guardian's Signature: (Required if the	applicant is <u>under</u> 18	years of age)	Date:	mm / dd / yyyy	
Parents/Guardian's email addres	s:	(Required if the a	nnlicant is unde	r 18 years of age)	
		(required if the a	PPricant is unde	- 10 yours of ago)	

Section 12 -	Personal Statemer	nt - Continue	
			\neg

The University of Belize School of Medicine Admission Guidelines (Excerpt)

Eligibility Criteria

Academic Eligibility Criteria:

- The minimum standard is the successful completion of the University of Belize's Associate degree in PreMedical Sciences with a minimum cumulative GPA of 3.0.
- Applicants with a Bachelor of Science degree in Biology, Chemistry, or Biochemistry with a minimum cumulative GPA of 3.0 are also eligible.
- Applicants who do not meet the above academic eligibility criteria must meet the testing requirements.

Testing Requirements:

- Applicants must provide scores from either the UBSoM Qualifying Entrance and Scholarship Examination (QESE) or the MCAT.
- QESE: Minimum required score is 320 (minimum of 80 in each section).
- MCAT: Minimum score of 500 is recommended.

Evaluation Process

- Initial Screening: Applications are reviewed for completeness and compliance with eligibility criteria. Incomplete applications will not be considered.
- Academic Assessment: Academic records and test scores are evaluated to assess academic readiness for the program.
- Interview: Shortlisted candidates will be invited for an interview to assess their motivation, communication skills, and suitability for the medical profession.

Selection Criteria

The following criteria will each receive a score. The highest scoring applicants will be accepted.

- Academic Performance: Academic transcripts and test scores.
- Interview Performance: Assessment of the candidate's suitability based on the interview.
- Letters of Recommendation: Quality and relevance of the recommendations.
- Personal Statement: Clarity, motivation, and alignment with the mission of UBSoM.

Notification and Acceptance

- Notification: Applicants will be notified of their admission status within 15 business days after the interview.
- Acceptance: Accepted candidates must confirm their acceptance and submit the required deposit by the date indicated in the letter to secure their place in the program.

3.6 Registration and Orientation

- Registration: Accepted students must complete the registration process by the date indicated in the acceptance letter.
- Orientation: All new students are required to attend the orientation program, which provides an overview of the curriculum, expectations, and resources available at UBSoM.

Tuition Scholarship

- The UBSoM offers a total of 5 tuition only scholarships annually based on academic performance on the QESE. These include 1 for 100%, 1 for 75%, 1 for 50% and 2 for 25%.
- Scholarship Tiers:
- 100% Tuition Waiver: Achieve 93-100%
- 75% Tuition Waiver: Achieve 90-92.9%
- 50% Tuition Waiver: Achieve 88-89.9%
- 25% Tuition Waiver: Achieve 85-87.9%

International Students

- Visa Requirements: International students must comply with Belizean visa requirements and obtain the necessary documentation before enrolment.



Educational Background Summary

(From Beginning to Present)

Education Empowers a Nation	(
	Applicant's Name	ID Number (Provided by UB)

PLEASE SEE REVERSE SIDE FOR INSTRUCTIONS.

If you attended a Non-Traditional High School, Homeschooling, or Continuing Education Program, the University of Belize wishes to obtain a chronological record of your school attendance showing when you started school, how far you went, the type of school you attended (Secondary/College), the certificates you earned, the examinations you passed, and your graduation.

		. your gradat					
Calendar Year	Age	Year in School	Type of School	Full name of School	School Address	Language of Instruction	Certificates, Diploma Degrees, Graduation

Vevised

Instructions

Calendar Year:

• On each line write the appropriate calendar year(s) for every school year you attended such as 2005, 2008–2010 etc

Age:

- Write your age. If you were 6 years old when you attended school for the first time, write 6 on the first line.
- Write your age for each grade you attended.

Year in School:

- These are the actual years you attended school. Your first year in school is number 1, your second year in school is number 2, and so on.
- You must account for every year. If you were out of school for an amount of time it must be noted.
- Allow one line for each year

Type of School:

- Write the type of school you attended, such as Kindergarten, Elementary, Grundschule, Volkschule, Mittleschule, Gymnasium, Lycee, Colegio, Ecole Superior, Secondary School, Grammar School, Teacher's College, University etc.
- Use the terminology of the country where the school was located. Do not try to translate into English.

Full Name of School:

• Enter the name of each school you attended.

School Address:

• Write the city, village, or town and country where each school you have attended is located.

Language of Instruction:

• Write the language used in class by your teachers.

Certificates, Diploma, Degree, Graduation:

- Write the name of any examination(s) you passed or certificate(s) you obtained at the end of that school year. For example, if you completed secondary school at the end of your twelfth year in school, write the name of the final document you received: GCE, Reifezeungis, Artium, Studentereksamen, Bachillerato, Baccalaureat etc.
- Do not try to express the name of any document in terms of what you think the equivalent in Belize is.
- Certified translations into English of supporting documents from the secondary level and above must accompany this form.



Office of Admission

University of Belize Hummingbird Avenue, Belmopan P.O. Box 340

(501) 822-1000 ext. 1501/1502/1510

ubsomadmissions@ub.edu.bz

New Students Recommendation Form #1

The University of Belize appreciates your willingness to evaluate the academic potential, ethical behavior, and or professional attitude of the applicant. Your recommendation is important to the admission process and will help in advising the applicant. Please complete and return this form to the University of Belize at etranscripts@ub.edu.bz If you are unable to email the form, kindly place same in a sealed and signed envelope and return it to the applicant for submission with the admissions package. If the form is not sufficient to the task, please submit a letter along with the form.

This form must be completed by a licensed medical practitioner or a licensed healthcare professional.

Applicant's Name	Applicant's Email Address	Applicant's Institution
Applicant's Program of Study	Applicant's Contact Number	Recommender's Name
Recommender's Email Address	Recommender's Contact Number	
I have known the applicant for year	rs and months.	
In what capacity have you known the applica	ant?	
How best would you describe the applicant's at UB?	s fitness, capability, aptitude and maturity	to engage higher level studies
Is the applicant's academic performance a tr	ue reflection of his/her ability? Yes	No
Please note any extra-curricular activities, po		
Please note any extra-curricular activities, po		dill.
Please give an example to represent the app	olicant's personal ethics:	

Please rate the applicant on the following attributes:				
	Excellent (Top 10%)	Good	Average	Below Average
Motivation				
Leadership				
Written Communication				
Oral Communication				
Intellectual Curiosity				

Final Recommendation (Check one box only):

- ☐ I highly recommend this applicant for admission to UB.
- I recommend that this applicant be given the opportunity to show his or her ability at UB.
- I recommend this applicant but I am concerned about their academic ability or personal traits.
- $\hfill \square$ I cannot recommend this applicant for admission to UB.

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Signature

Date



Office of Admission

University of Belize Hummingbird Avenue, Belmopan P.O. Box 340

(501) 822-1000 ext. 1501/1502/1510 ubsomadmissions@ub.edu.bz

New Students Recommendation Form #2

The University of Belize appreciates your willingness to evaluate the academic potential, ethical behavior, and or professional attitude of the applicant. Your recommendation is important to the admission process and will help in advising the applicant. Please complete and return this form to the University of Belize at etranscripts@ub.edu.bz If you are unable to email the form, kindly place same in a sealed and signed envelope and return it to the applicant for submission with the admissions package. If the form is not sufficient to the task, please submit a letter along with the form.

This form must be completed by a junior college or university counselor, junior college or university lecturer, or the Manager or Supervisor at the applicant's place of employment.

Applicant's Name	Applicant's Email Address	Applicant's Institution
Applicant's Program of Study	Applicant's Contact Number	Recommender's Name
Recommender's Email Address	Recommender's Contact Number	
have known the applicant for: yea	ars and months	
n what capacity have you known the applica	ant? I have known the applicant in the	capacity of:
How best would you describe the applicant's studies at UB?	s fitness, capability, aptitude and matur	ity to engage in higher level
s the applicant's academic performance a to	rue reflection of his/her ability? Yes _	No
Please note any extra-curricular activities, po	ositions held or achievements of the ap	pplicant:
Please give an example to represent the app	plicant's personal ethics:	
Please rate the applicant on the following a	ttributes: Final Recommendation	on (Check one box only):
1= " . 1		•

Excellent Average Below Good (Top 10%) Average Motivation Leadership Written Communication

Oral Communication

Intellectual Curiosity

academic ability or personal traits.

□ I cannot recommend this applicant for admission to UB.

show his or her ability at UB.

• •

□ I highly recommend this applicant for admission to UB.

□ I recommend that this applicant be given the opportunity to

□ I recommend this applicant but I am concerned about their

Signature

Date