



UNIVERSITY  
of HAWAII  
MĀNOA

University of Hawai'i at Mānoa  
John A. Burns School of Medicine



**John A. Burns School of Medicine (JABSOM)  
Doctor of Medicine Early Acceptance Program (DMEAP) for Entering Hawai'i Resident Freshman  
PERSONAL STATEMENT FORM**

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Name of Applicant: \_\_\_\_\_ Date of Birth (mm/dd/yyyy): \_\_\_\_\_

**Describe why you want to pursue a career in medicine (Please type)**



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PERSONAL STATEMENT FORM (Page 2)**

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Name of Applicant: \_\_\_\_\_ Date of Birth (mm/dd/yyyy): \_\_\_\_\_

**Describe why you want to attend the University of Hawai'i John A. Burns School of Medicine (Please type)**



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PERSONAL STATEMENT FORM (Page 3)**

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Name of Applicant: \_\_\_\_\_ Date of Birth (mm/dd/yyyy): \_\_\_\_\_

**What is your most significant experience in the areas of community service, volunteer and/or leadership and why did you choose this experience? (Please type)**

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

Completed applications must be RECEIVED by the JABSOM Office of Admissions  
no later than **Thursday, December 1, 2016 at 4:30 pm.**

Please email applications to: **medadmin@hawaii.edu**