



MedExplore Leadership Program Application Form

STUDENT PERSONAL INFORMATION			
Name		Birth date	
Full Address		Home School	
Community		E-mail	
Phone number		Gender	
REFEREE INFORMATION			
Name		E-mail	
Title		Phone Number	
Work Address			

Which following best describes you at school:

- Greater than 65% in more than half my courses
- Greater than 75% in more than half my courses
- Greater than 80% in more than half my courses
- Greater than 90% in more than half my courses

Why would you like to participate in this program:

Describe some of your expectations from the program:

What was the highest level of education of your parents?

- Grade 10 High School
- Ontario High School Diploma
- College Degree
- University Degree
- Post-graduate Degree (Master's degree, Doctorate degree)
- Professional Degree (Medicine, Law, Chartered accounting)

Describe the occupation of your parents: