

**UC San Diego Skaggs School of Pharmacy and Pharmaceutical Sciences
Program Commitment and Application for the 7-Year BS in Chemistry –
Pharm.D. Program
For Admission in Fall 2024**

Name: _____ PharmCAS Number: _____

I am applying for:

- Early Submission (Monday, October 2, 2023, deadline)
- Traditional Submission (Thursday, January 4, 2024, deadline)
- Traditional Submission (Friday, March 1, 2024, deadline)

You are eligible to apply for this program if you meet **all** of the following requirements. Complete the following checklist:

- I am a UC San Diego undergraduate student with a major in Pharmacological Chemistry.
- I am a U.S. citizen/U.S. permanent resident/DACA with AB540 at time of application.
- I will have completed two years of undergraduate study at UC San Diego by August 2022.
- I will have completed the following courses at UC San Diego by the end of the 2022 summer II session.
- I have a cumulative overall minimum GPA of **3.00**.
- I have a cumulative science minimum GPA of **2.80**.
- I have planned my schedule to complete all of the UC San Diego Pre-Pharmacy requirements by the end of summer session **2024**.
- I will have completed all of my undergraduate college's general education and my chemistry major requirements by the end of summer session **2024**.
- I will be completing all the following courses below by Fall 2023.
- *Please fill this out if any of the courses below are scheduled for the Winter or Spring 2024 quarter*** In Progress Pre-Requisite Coursework _____

- CHEM 6A, 6B, 6C & 7L
- CHEM 41A, 41B, 41C & 43A
- ** MATH 20A, 20B, 20C, 20D
- ***PHYS 2A, 2B, 2C or 2D & 2BL or CL or DL
- BILD 1 & 2

** MATH 10 series are also acceptable (may take MATH 10A, 10B, 10C and 11)

*** PHYSICS 1 series are also acceptable (may take PHYS 1A, 1AL, 1B, 1BL, 1C, and 1CL)

If you checked all eight of the above items, you are eligible to apply for this program.

In addition to reviewing and signing this application form, you must apply to the Pharm.D. Program by completing:

- 1.) [A PharmCAS application](#)
- 2.) **Pay all necessary application fees to PharmCAS.**

To prepare for the application please refer to these documents: [Application To-Do List](#) and [PharmCAS Application Tips](#).

Please review and sign this application and email it to: bspharmd@health.ucsd.edu

I wish to apply to the combined 7-Year BS in Chemistry/Pharm.D. Program and the information disclosed on this application is true and correct. I also understand that any falsification or misrepresentation of facts will cause disqualification of this application.

Signature: _____

Date: _____