



# 4+1 Bachelor of Science in Public Health to Master of Public Health Program

Department of Social and Behavioral Sciences

## College of Public Health

The 4+1 MPH Program is a 5-year program that gives outstanding undergraduate Temple public health majors an opportunity to acquire Bachelor of Science (BS) and Master of Public Health (MPH) degrees in Social and Behavioral Sciences or Health Policy and Management. Students will take a minimum of 110 credits of undergraduate course work and 12 credits of graduate coursework during their first four years. They will then take an additional 27 credits of graduate coursework after they receive their BS to satisfy the MPH requirements.

**Requirements:** Students must be a declared public health major at the time of application and have a minimum 3.5 cumulative GPA in at least 45 credits of coursework taken at Temple University. Students apply in the Spring semester of their second (sophomore) year at Temple and the Graduate Record Examination is not required. **Due April 14<sup>th</sup>.**

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

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

TU ID#: \_\_\_\_\_

TU Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Please check one: \_\_\_\_\_ BSPH to MPH in Social and Behavioral Sciences  
\_\_\_\_\_ BSPH to MPH in Health Policy and Management

List two names and emails from faculty attesting to your ability and likelihood of success in the program:

Please attach:

- Official transcript from Temple University and any transfer institutions
- A statement of purpose describing your interests in applying for the program and career goals in the field of public health
- Two academic letters of recommendation

Student Signature: \_\_\_\_\_

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

**RETURN FORM/REQUESTED MATERIALS TO:** Caite Wolak, Undergraduate Director, Department of Social and Behavioral Sciences, Temple University, 1301 Cecil B. Moore, 9<sup>th</sup> Floor, Philadelphia PA 19122 caite.wolak@temple.edu

Office Use Only:

Cumulative GPA: \_\_\_\_\_

APPROVED

NOT APPROVED

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date