PERSONAL INFORMATION CONTINUED						PMBC Use Only
3.	 a. Have you served or are you currently serving in the military? b. Are you married to, or in a domestic partnership or other legal union with, an active duty member of the U.S. Armed Forces assigned to a duty station in California under official active duty military orders? If YES, please provide evidence of your marriage, or domestic partnership or other legal union and your spouse or partner's military duty orders. c. Are you requesting to expedite this application as the spouse of an active duty member of the U.S. Armed Forces? If YES, please provide evidence of your marriage, or domestic partnership or other legal union, your spouse or partner's military duty orders and your current DPM 			☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes	□ No □ No	
	licensure in another state, district or U.S. territory. d. Are you requesting to expedite this application as an honorably discharged former active duty member of the U.S. Armed Forces? If YES, please provide evidence of your honorable discharge			□ Yes	□No	
4.	Do any of the following statements apply to you: a. You were admitted to the U.S. as a refugee pursuant to section 1157 of title 8 c			□ Yes	□ No	
	the U.S. Code; b. You were granted asylum by the Secretary of Homeland Security or the U.S.			□ Yes	□ No	
	Attorney General pursuant to section 1158 of title 8 of the U.S. Code; or, c. You have a special immigrant visa and were granted a status pursuant to sectio 1244 of Public Law 110-181, Public Law 109-63, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan			□ Yes	□No	
	translators/interpreters or those who worked for or on behalf of the U.S. government.					
	If YES, you must attach evidence of your status as a refugee, asylee, or special immigrant visa holder. Failure to do so may result in application review delays.					
PREMEDICAL EDUCATION						
5.	. List Name and address of all colleges or universities where premedical education was received.					
	Name of Premedical School(s)	Mailing Address	Atter	endance Dates		
			Start			
			End			
			Start End			
			Start			
			End			
			Start			
			End			
						P1B