

## 2013 AMCAS Application Worksheet

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The 2013 AMCAS Application Worksheet was created in order to help applicants prepare to complete an AMCAS application for the 2013 entering class. While the information you enter on this worksheet is the information you will enter in your AMCAS application, the presentation and layout of the questions on this worksheet do not represent exactly the presentation and layout of the AMCAS application on the Web.

Also, this worksheet does **not** include every question that appears in the online application—we have included only those that may take some time for you to answer. As such, AMCAS recommends that you use this worksheet only as a guide, and that you give yourself ample time to complete and submit the actual application once it becomes available. Many applicants need several hours and more than one sitting to complete the application.

Helpful tips are indicated in *blue*. **Do not submit this worksheet to AMCAS.**

### 1. Identifying Information

#### Names

In addition to your full legal name, you should enter all alternate names that may appear on your transcripts, MCAT scores, previous AMCAS applications, or other supporting documentation that must be matched to your application.

First	Middle	Last	Suffix

*Tip: We suggest you check your transcripts and other documents mentioned above to ensure that you enter all possible names and combinations of your legal name. Failure to include pertinent names may delay the processing of your application.*

#### Alternate Names

Alternate Names are any variations of your name, such as a family (maiden) name or a nickname that may appear on transcripts sent to AMCAS by one of the schools you have attended.

First	Middle	Last	Suffix

#### Required and Alternate IDs

Applicants are required to enter their Social Security Number/Canadian Social Insurance Number and any identification numbers that may appear on your transcripts, MCAT scores, previous AMCAS applications, or other supporting documentation that must be matched to your application. AMCAS strongly encourages you to enter those identification numbers.

*Tip: We suggest you check your transcripts and the other documents mentioned above to ensure that you know which numbers to enter. Failure to include pertinent Alternate IDs may delay the processing of your application.*

1) SSN/SIN	2)	3)
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### Birth and Sex

Enter information about when and where you were born.

Birthdate (MM/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_

Birth Country	Birth State/Province	Birth County	Birth City

Sex: M / F / Decline to Answer

## 2. Schools Attended

### High School

Enter information about your high school.

*Tip: If you attended multiple high schools, only include the school that you graduated from.*

School Name		
Country	State	County
City	Graduation Year	

### Colleges

Here you will enter information relative to each college you have attended. Copy this page as often as necessary to include each of the colleges you have attended.

*Tip: Remember to include every college you attended, including any military coursework and regardless of how many courses you took; whether or not you earned credit or a grade from that course; and whether or not the course was transferred to another school.*

School Name				
Country	State		City	
Program Type (select one)	Junior College	Undergraduate	Post-baccalaureate	Graduate
Dates of Attendance	From:	To:		
Did you attend this school for summer school only?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you authorize AMCAS to release information about your application, including MCAT scores, to school-designated advisors, provided this institution is eligible to receive such information based on the criteria set forth by AMCAS?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you earn a degree at this school? If Yes, include type of degree.				<input type="checkbox"/> Yes <input type="checkbox"/> No
What was your major, if any, at this school? If you had multiple majors, list them all.				
What was your minor, if any, at this school? If you had multiple minors, list them all.				

### **Military Coursework**

Include in your list of Schools Attended any military educational institutions where you took courses. You will need an AARTS or SMART transcript. See the [AMCAS Instruction Manual](#) for further details.

### **Study Abroad Coursework**

If you completed coursework at a foreign institution as part of a study abroad program that was sponsored by a domestic school, you should include both schools in your list of Schools Attended. See the [“How to Enter Study Abroad Course Work”](#) tutorial on the AMCAS Web site for assistance entering these courses.

### **Transcript Requests**

The Transcript Requests section of the actual AMCAS application allows you to create and print AMCAS Transcript Request forms to send to registrars at schools from which AMCAS requires official transcripts in order to process your application. This section also allows you to request exceptions for transcripts that are not required by AMCAS.

*Tip: While AMCAS will accept transcripts that are not attached to AMCAS Transcript Request forms, AMCAS is not responsible for transcripts that cannot be matched to your application due to the omission of an AMCAS Transcript Request form. AMCAS encourages you to utilize these forms, and to inform the registrars from whom you seek transcripts that this form should be attached to the transcript when it is sent to AMCAS.*

**VERY IMPORTANT:** We also strongly recommend that you request personal copies of your official transcripts for your use in completing the Course Work section of your application. Review each official transcript carefully to be certain that:

- All course work to-date is listed.
- Any narrative evaluations received instead of grades are attached to your record.
- All final grades are reported correctly.
- All final grade changes have been clearly recorded.
- Any list of other institutions attended is correct and complete.

The following questions will be asked in the Transcript Requests section. Specific directions about transcript requirements are available in the [AMCAS Instruction Manual](#).

#### **Transcript Identification**

- School Name
- Date Attended
- ID number listed on transcript
- Your name, as it appears on transcript
- Is this transcript required by AMCAS?

#### **School Address Information**

For most schools, address information will appear automatically in the application; however, you should always confirm the current address for your registrar.

#### **Previous Matriculation to a Medical School**

Answer **Yes** to this question if you have ever matriculated into any medical school, regardless of what country it was in. Your matriculation status may not be dependent upon registration, enrollment, or the initiation/completion of coursework. Check with the medical school if you have any questions regarding your matriculation status. Failure to accurately answer this question will result in an investigation.

If you answer **Yes**, you may use the space provided to explain why you are reapplying to medical school at this time; this space is 1325 characters or approximately one-quarter of a page in length. You will receive an error message if you exceed the allotted space.

Have you ever matriculated at or attended any medical school as a candidate for a medical degree?

- Yes       No

If yes, use the space below to explain.

Space provided: 1325 characters.

### **Institutional Action**

Medical schools require you to answer this question accurately and provide all relevant information. Medical schools understand that many individuals learn from the past and emerge stronger as a result. Full disclosure will enable the medical schools to more effectively evaluate this information within the context of your credentials.

You must answer **Yes** to this question if you were ever the recipient of any Institutional Action resulting from unacceptable academic performance or a conduct violation, even if such action did not interrupt your enrollment or require you to withdraw. You must answer **Yes** even if the action does not appear on or has been deleted from your official transcripts due to institutional policy or personal petition.

Were you ever the recipient of any institutional action by any college or medical school for unacceptable academic performance or conduct violation?

- Yes       No

If yes, use the space below to explain.

Space provided: 1325 characters.

### 3. Biographic Information

#### Preferred Mailing Address

This is the address to which all medical school correspondence will be sent. This information is very important and must be kept up-to-date throughout the application process up to the date of matriculation – you may log in to your application even after you have submitted it to AMCAS to change your contact information.

*Tip: E-mail is the primary mode of communication between AMCAS and the applicant. AMCAS correspondence is sent only by e-mail and will not be sent to you unless you provide an e-mail address. Many of the medical schools will also use e-mail as the primary mode of communication.*

Country		
State/Province	County	City
Street Address		
Zip/Postal Code		
Daytime Phone	Evening Phone	Fax
E-mail		

#### Permanent Mailing Address

This address is used only if correspondence sent to your Preferred Address is returned by the postal service.

Country		
State/Province	County	City
Street Address		
Zip/Postal Code		
Daytime Phone	Evening Phone	Fax
E-mail		

#### Alternate Contact

If you enter an Alternate Contact, you authorize AMCAS and your designated medical schools to release information to this contact relevant to your application and/or admissions status. However, AMCAS and the medical schools are under no obligation to release information to your Alternate Contact(s). An Alternate Contact may be especially important if you expect to be out of the country or in an area with limited phone and/or e-mail access.

Name		
Relationship		
Country		
State / Province	County	City
Street Address		
Zip/Postal Code		
Daytime Phone	Evening Phone	Fax
E-mail		

**Citizenship**

Are you a citizen of the United States?

- Yes       No

If No, provide your country of citizenship and your current immigration status.

Country: \_\_\_\_\_

Status: Adjustment of Status / Exchange student (J1) / None / Other / Permanent Resident / Refugee or Asylum / Student (F1)

**Legal Residence**

You must declare the state in which you are a legal resident.

State of Legal Residence: \_\_\_\_\_

County: \_\_\_\_\_

*Tip: You may only declare one state of legal residence in the AMCAS application even if you qualify for residency in more than one state.*

**Self Identification**

This information is optional. If you select one of the main categories listed below, additional subcategories will be shown. You may choose as many or as few options as you would like.

- Hispanic, Latino, or of Spanish origin
- American Indian or Alaska Native
- Asian
- Black or African-American
- Native Hawaiian or Other Pacific Islander
- White
- Other

**Languages**

What languages do you speak? For each language, also rate your proficiency and use in your childhood home.

Language(s)	Proficiency	Use in Childhood Home

Proficiency: Native/functionally native, Advanced, Good, Fair, or Basic  
 Use in Childhood Home: Never, Rarely, From time to time, Often, or Always  
 (refer to the guidelines presented on-screen in the application for more information)

**Childhood Information**

- In what area did you spend the majority of your life from birth to age eighteen? Check only one.
  - Yes
  - No
  - Don't Know
  - Decline to answer

City
Description (Check only one):
<input type="checkbox"/> Military or Government Installation
<input type="checkbox"/> Suburban
<input type="checkbox"/> Urban
<input type="checkbox"/> Other
<input type="checkbox"/> Rural

- Do you believe that this area was medically under-served?
  - Yes
  - No
  - Don't Know
  - Decline to answer
- Have you or members of your immediate family ever used federal or state assistance programs?
  - Yes
  - No
  - Don't Know
  - Decline to answer
- What was the income level of your family during the majority of your life from birth to age eighteen? Circle the answer that applies.

Don't know	\$10,000 - \$12,499	\$25,000 - \$29,000	\$50,000 - \$59,000
Less than \$5,000	\$12,500 - \$14,999	\$30,000 - \$34,999	\$60,000 - \$74,000
\$5,000 - \$7,499	\$15,000 - \$19,999	\$35,000 - \$39,999	\$75,000 or more
\$7,500 - \$9,999	\$20,000 - \$24,999	\$40,000 - \$49,999	Decline to Answer

5. Did you have paid employment prior to age eighteen?  
 Yes                       No                       Decline to answer
6. Were you required to contribute to the overall family income (as opposed to working primarily for your own discretionary spending money)?  
 Yes                       No                       Decline to answer
7. How many people who lived in your primary household during the majority of your life from birth to age eighteen?
8. How have you paid or did you pay for your post-secondary education? For each of the applicable options below indicate the average percentage contribution towards your post-secondary education. The percentages entered should equal 100%.

Academic Scholarship	%
Financial Need-based Scholarship	%
Student Loan	%
Other Loan	%
Family Contribution	%
Applicant Contribution	%
Other	%
<b>TOTAL</b>	100 %

### Disadvantaged Status

Do you wish to be considered a disadvantaged applicant by any of your designated medical schools, which may consider such factors (social, economic or educational)?

- Yes                       No

If you answered **Yes**, please explain below why you believe you should be considered a disadvantaged applicant by your designated medical schools:

Space provided: 1325 characters.

### Dependents

How many dependents do you have?

### Parents

Parent Name
Occupation
Highest Education Level



School Location	State	City
School		
Country of Legal Residence		
State	County	Living Yes / No / Do Not Know
<input type="checkbox"/> I am not able to provide this information.		

**Siblings**

Sibling Age
Sibling Sex

**Felony**

Have you ever been convicted of a Felony?

- Yes       No

Space provided: 1325 characters.

**Misdemeanor**

Have you ever been convicted of a Misdemeanor?

- Yes       No

Space provided: 1325 characters.

**Military Discharge**

Have you ever been discharged by the Armed Forces of the United States? Select "No" if you have never served in the Armed Forces or are currently serving without previous discharge.

- Yes       No

If Yes, did you receive an honorable discharge or a discharge under honorable circumstances?

- Yes       No

#### 4. Course Work

In this section, you will enter all courses in which you have enrolled, regardless of whether credit was earned, for each of the schools you have attended. You must include any course you have ever enrolled in at any U.S., U.S. Territorial, or Canadian post-secondary institution, regardless of whether credit was earned. This includes, but is not limited to:

- Courses from which you withdrew.
- Courses for which you received a grade of “Incomplete” and for which no final grade has been assigned.
- Courses that have been repeated; *Repeated courses and courses removed from your transcript or GPA as a result of academic bankruptcy, forgiveness, or similar institutional policies should be entered exactly as they appeared on the transcript issued prior to removal/repeat.*
- Courses that you failed, regardless of whether they have been repeated.
- Courses in which you are currently enrolled or expect to enroll in prior to entering medical school.
- Remedial/developmental courses.
- College-level courses you took while in high school even if they were not counted toward a degree by any college.
- Courses taken at an American college overseas.
- Courses removed from your transcript or GPA as a result of academic bankruptcy, forgiveness, or similar institutional policies.

You must:

- Enter courses exactly as they appear on the transcript of the school where they were originally attempted, not as they appear on the transcript of any school which may have accepted the courses in transfer. Only specific types of special courses qualify for an exception to this rule.
- Enter courses in chronological order. Within each term, list the courses in the order in which they appear on the official transcript.

While there is no way to replicate exactly the manner in which you will enter your course information in the AMCAS application, we urge you make certain you have the correct information at your disposal once the application becomes available. You will be required to list the following information for each course you have taken:

- Academic Status (Freshman, Sophomore, etc.)
- Course Number (as it appears on transcript)
- Course Name (as it appears on transcript)
- Course Classification (Math, History, etc.; See the Course Classification Sheet for help.)
- Course Type (Advanced Placement, Withdrawal, Repeat, etc.)
- Credit Hours
- Official Transcript Grade

*Tip: Use an official copy of your transcript to find this information.*

## 5. Work/Activities

The Work/Activities section of the application is designed to give you the opportunity to include in your application any work or extracurricular experiences, awards, honors, or publications that you would like to bring to the attention of the medical schools to which you are applying. You will be able to enter a maximum of fifteen experiences when completing the AMCAS application.

Only significant experiences should be included, and medical schools have indicated that they are more interested in quality than quantity. **Enter each experience only once.** Repeated experiences should only be entered once. For example, applicants who make the Dean’s List for multiple terms should enter this experience only once; applicants can indicate that the experience was repeated in the explanation field.

You can identify up to three activities as “Most Meaningful.” After you enter the required information, check the box to select this activity as one of your “Most Meaningful.” You will be allowed an additional 1325 characters to summarize why you have selected this experience as one of your most meaningful. In your remarks, you might consider the transformative nature of the experience: the impact you made while engaging in the experience and the personal growth you experienced as a result of your participation.

For each experience entry, choose from the following list the experience type that best describes each experience.

- Paid Employment—Not Military
- Paid Employment—Military
- Community Service/Volunteer—Not Medical/Clinical
- Community Service/Volunteer—Medical/Clinical
- Research/Lab
- Teaching/Tutoring
- Honors/Awards/Recognition
- Conferences Attended
- Presentations/Posters
- Publications
- Extracurricular/Hobbies/Avocations
- Leadership—Not Listed Elsewhere
- Other

Include the following information for each experience you decide to enter. Copy this page as many times as needed so you can complete the information for each experience you intend to enter into your application:

Experience Type (see list above)	
Experience Name	
Dates Start (month/year)	End (month/year)
Average Hours/Week	
Organization Name	
Country	City
Contact Name	Contact Title
Contact’s Phone	Email Address
Experience Description: The available space for each description is 700 characters (including spaces).	
<input type="checkbox"/> Most Meaningful	

Experience Summary: The available space for each description is 1325 characters (including spaces).

## 6. Letters of Evaluation

The Letters of Evaluation/Recommendation section of the application is designed to give you the opportunity to indicate who your letter writers are. A recommendation letter or letter of evaluation is a letter in which the author assesses the qualities, characteristics, and capabilities of the person being evaluated. AMCAS accepts Letters of Evaluation for most medical schools, for a complete list please visit: [www.aamc.org/aboutamcasletters](http://www.aamc.org/aboutamcasletters). This service enables medical schools to receive all letters electronically from AMCAS, and enables your authors to send all letters to be considered by schools participating in this service to AMCAS rather than to each school.

There are several mediums in which a letter writer can send your letter to AMCAS. AMCAS will receive letters from the AMCAS Letter Writer Application, Interfolio, Mail, and VirtualEvals. Applicants are required to send their letters through one of the above mediums to AMCAS if the medical school is participating in the service.

You can have up to 10 letters associated with the AMCAS application. This relatively high number is intended to enable you and your letter writers who wish to do so to target specific letters to specific schools, and is not intended to suggest that any one school wishes to receive 10 letters. AMCAS will retain and deliver letters only within a single application year. You cannot make any changes to letter information after you have submitted it.

Note the following:

- 1 Individual letter = 1 letter
- 1 Committee letter = 1 letter
- 1 Letter packet = 1 letter

## 7. Medical Schools

Review your medical school designations carefully. Once you have submitted your application to AMCAS you cannot remove or substitute schools on your designation list under any circumstances.

To designate additional schools once you have submitted your application to AMCAS, you must log in to your AMCAS application, select the additional schools you wish to designate, and re-certify and resubmit your application to AMCAS. You must re-certify and resubmit your application with the additionally designated schools by the stated deadlines of the schools you wish to add. Deadlines may differ for different Program Types.

After you choose the programs that you will apply to, be sure to assign the correct letter entries (from the previous section) to the programs that you wish to receive the letter.

## 8. Essay(s)

Consider and write your Personal Comments carefully; many admissions committees place significant weight on this section.

- The available space for this essay is 5300 characters (including spaces), or approximately one full page. Hard returns (“Enter” key) count as two characters.
- Proofread carefully! No changes (including grammatical or typographical errors) may be made after your application is submitted to AMCAS.
- You cannot run a spell check in the AMCAS Application.
- Applicants who plan to cut and paste their essays into the application should draft their essays in a plain text format, preferably in text-only word processing software such as Microsoft Notepad. Copying formatted text into the application may result in formatting issues that cannot be edited once your application is submitted.
- Applicants should enter all text responses in the application just as they would like the medical schools to see them, avoiding use of all caps or all lower case. Medical schools have indicated that they prefer to receive applications that evidence normal writing practices regarding case.
- Plagiarism or misrepresentations will prompt an investigation.
- It is not necessary to repeat information reported elsewhere on your application.

Some questions you may wish to consider while drafting this essay are:

- Why have you selected the field of medicine?
- What motivates you to learn more about medicine?
- What do you want medical schools to know about you that has not been disclosed in another section of the application?

In addition, you may wish to include information such as:

- Special hardships, challenges or obstacles that may have influenced your educational pursuits.
- Commentary on significant fluctuations in your academic record, which are not explained elsewhere in your application.

If you indicate that you will be applying to a school’s M.D.-Ph.D. program, you will be required to enter two additional essays: the M.D.-Ph.D. Essay, in which you state your reasons for wishing to pursue the combined M.D.-Ph.D. degree, and a Research Experience Essay, in which you describe your significant research experiences. The available space for the M.D.-Ph.D. Essay is 3000 characters and the available space for the Research Experience Essay is 10,000 characters.

## 9. Standardized Tests

### MCAT Scores

MCAT scores earned in 2003 and later will be automatically released to AMCAS. Applicants who wish to release MCAT scores earned between 1991 and 2003 and have not yet done so may release the scores online at the following site: <http://www.aamc.org/students/mcat/sendscores>.

To release scores earned before 1991, please complete the MCAT Testing History Report Request Form available at: <http://www.aamc.org/students/mcat/sendscores/thxapplication.pdf>. Once you release your scores, you cannot un-release them; they will be included in all future AMCAS applications.

Most medical schools require that MCAT scores are no more than three years old. Consult the schools to which you are applying to ensure you meet their requirements.

## Other Tests

If you are an applicant to a special program, such as an M.D.-Ph.D. or an M.B.A.-M.D., schools may require other test scores. Examples of other tests include the GMAT, LSAT, MAT, or GRE. If a test you have taken has multiple sections (e.g. GRE-Math and GRE-Psych), treat each section as a separate test by entering each section separately. AMCAS does not verify test scores other than the MCAT. Your designated medical schools may require additional information and official score reports; do not send score reports to AMCAS.

## Certification and Submission

In order to submit your application, you must certify the statement below. **Your certification of this statement serves the same purpose as a legal signature and is binding; therefore, checking each box below is the same as signing the application.**

- "I certify that the information in this application and associated materials is current, complete, and accurate to the best of my knowledge."
- "I certify that all written passages, such as the personal statement, essays required from M.D.-Ph.D. applicants, and descriptions of work/activities, are my own and have not been written, in part or in whole, by a third party. Quotations are permitted if the source is cited."
- "I have read, understand and agree to comply with AMCAS Instructions, including the provisions noting that I am responsible for monitoring and ensuring the progress of my application process by checking the Main Menu of my application. I understand that I am also responsible for reviewing my application after AMCAS processing is complete."
- "AAMC investigates and may report to legitimately interested parties discrepancies in information, attempts to subvert the admission process, and any other irregular matter that occurs in connection with application activities. I understand and agree that the sole and exclusive remedy available to me to appeal or otherwise challenge the AAMC's decision to send an investigation report to legitimately interested parties shall be confidential, binding arbitration through written submissions only to the Washington, D.C. office of the American Arbitration Association under the expedited procedures for commercial matters. I understand that my failure to request in writing arbitration within 30 calendar days of receipt of an investigation report that has been approved by the AAMC for transmittal to interested parties will constitute an absolute bar and waiver of this exclusive remedy. I further understand that the sole issue for arbitration shall be whether the AAMC acted reasonably and in good faith in making its decision."
- "I understand that I am responsible for knowing and understanding the admissions requirements for each school to which I am applying, and that I am not eligible for a refund of AMCAS fees if I do not meet the admissions requirements of the medical schools."
- "I understand that I am required to inform the Admissions Office of each medical school to which I apply if I am convicted of, or plead guilty or no contest to, a misdemeanor or felony crime after the date of my original application submission and prior to medical school matriculation. I understand that this communication must be in writing and must occur within ten (10) business days of the occurrence of the criminal charge or conviction."
- "I understand that I am required to inform the Admissions Office of each medical school to which I apply if I become the subject of an institutional action after the date of original application submission and prior to medical school matriculation. I understand that this communication must be in writing and must occur within ten (10) business days of the occurrence of the institutional action."
- "I acknowledge and agree that my sole remedy in the event of any errors or omissions relating to the handling or processing of my application is to obtain a refund of my AMCAS application fee; however, I may be eligible for a refund only if I have notified AMCAS of any errors or omissions within ten (10) days of application processing completion."
- "I understand that AMCAS has my permission to release information, at the request of the medical school(s), to a third party to pre-populate online secondary applications."