MEDICAL, DENTAL, AND VETERINARY SCHOOL

APPLICATION YEAR GUIDELINES

FOR GS POSTBACCALAUREATE AND UNDERGRADUATE STUDENTS OF THE ENTERING CLASS OF 2025
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Introduction

This handbook is intended to guide GS undergraduate and Postbaccalaureate Premedical students through the application process for medical, dental, and veterinary school admissions. Your best resource during this process, however, will be your assigned premedical advisor in the School of General Studies.

There are many similarities between the application processes to medical, dental, and veterinary school and their timetables. In the interest of economy, the following guidelines describe the procedures for medical school admissions, although some specific information about each profession’s centralized application process is included. If you are applying to a program other than medical school, the following pages will be a useful guide, but you should also consult with your advisor for any special instructions.

These guidelines do not presume to be exhaustive. Indeed, the subtext throughout is simply that your advisors are here and interested to speak with you as questions arise during the application year, even if you are far from campus. We remain intensely interested in your progress toward your goals, and committed to helping you attain them. Please keep in touch.

The content of this handbook assumes that you qualify for committee support and have met the Premedical Committee application deadlines indicated in the timeline found on our website. However, even premeds who are planning to apply without the support of the Premedical Committee and its requirements will find useful information here.

Application Lifecycle
To orient your reading of the main part of this document, it may be helpful to provide an overview of the lifecycle of the medical school application.

The application lifecycle has nine overlapping phases:

1) Application to the Premedical Committee (deadlines in January and late June of the Orgo/Bio Year)
2) Choosing schools (winter and spring)
3) MCAT (Medical College Admission Test) (late spring/early summer)
4) AMCAS submission (primary or common) application (June)
5) Our submission of your Committee letter, including individual letters of recommendation (summer)
6) Secondary applications (summer)
7) Interviews (fall and winter of the application year)
8) The Wait (fall, winter, and spring of the application year)
9) Acceptance and matriculation (fall through end of application year)

Key Resources
Before discussing each of the phases of the application process, we should mention several important resources. The first is the Medical School Admissions Requirements (often referred to as the “MSAR”). This annual publication of the Association of American Medical Colleges (AAMC) provides standardized information about each of the more than 150 U.S. schools of allopathic medicine, as well as general information about the application process. The contents of the MSAR can be accessed through a paid subscription to a website. Secondly, the AAMC website (aamc.org) is an indispensable source of all manner of information about medical school and the process of applying, including aggregated admissions data from previous years. The American Dental Education Association, the American Association of Colleges of Osteopathic Medicine, and the Association of American Veterinary Medical Colleges publish counterparts to MSAR (although they are in a traditional book format), and their websites are sources of useful information.
Financial Considerations

Budget: Typical application year expenses include:

- Maintenance of Status fee (GS postbacs only): $160 per semester (see below, p. 19)
- Primary application fees (last year the fees were $170 for the first school and $43 for each additional school)\(^1\)
- Secondary application fees ($75-150 per each additional school)
- Transcript fees (variable)
- MCAT ($330), not including (where applicable) additional charges for late registration, changes to registration, etc.
- Medical School Admissions Requirements a.k.a. “MSAR” ($28)
- MCAT prep materials $268 and up
- MCAT prep course or tutoring: $3000
- Travel, lodging, and dining expenses for interviews
- Days off work perhaps without pay
- New clothing and/or dry cleaning expenses
- Acceptance deposits\(^2\)
- Moving expenses

**Approximate total application cost:** $4700-6200.

Fee assistance: The AAMC sponsors a fee-assistance program which greatly alleviates certain application costs for eligible applicants. For example, in a recent year, the cost of registering for the MCAT was reduced from $330 to $135, and AMCAS application fees for up to twenty schools are waived (a savings of ~$987). For more information about the AAMC fee assistance program, see: [students-residents.aamc.org/applying-medical-school/applying-medical-school-process/fee-assistance-program/](students-residents.aamc.org/applying-medical-school/applying-medical-school-process/fee-assistance-program/).

Creditworthiness: It is extremely important to have your finances in order so that you are regarded as “creditworthy.” Your credit rating can determine whether or not you can borrow. Therefore, if your rating is poor, you should ameliorate it before you matriculate. This means, for example, establishing a pattern of prompt payments with no delinquencies, repossessions, foreclosures, or outstanding debts in collections. Future health care professionals are regarded as good credit risks.

For more guidance on how to plan the financing of your medical education, please consult the “Financial Information, Resources, Services, and Tools” section of the AAMC website ([aamc.org/services/first/](aamc.org/services/first/)).

Social Media Presence
Look over any information you have made public about yourself through social media. Review this information as though you were an officer of admission at a medical school. Would you be turned off? Offended? Would you doubt the applicant’s seriousness of purpose? If so, you should remove the questionable content.

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\(^1\) A typical GS postbac or undergrad applicant will apply to twenty schools (give or take). This means that the fees for the AMCAS application alone are in the range of $987. In addition, an applicant may have to pay between $1500 and $2000 in supplemental application fees.

\(^2\) Deposits for AAMC-member schools are generally around $100 and usually refundable until April 30. Deposits for AACOM-member schools can be $1000 or even more and are non-refundable.
The Importance of Being Organized

The medical school application process may test not only the limits of your patience, but also your organizational abilities. It is in your best interests to create a simple system for tracking your applications school by school. What seems routine at the beginning may become confusing later in the process. Having a concise and explicit record of each program’s individual requests and deadlines recorded in one place may save you from making a careless error that could hurt your application.

Application to the Premedical Committee

The application to the Premedical Committee (the “internal application”) includes all those documents you submit in January (essays, resume, headshot, draft of personal statement and of your Work & Activities entries), and all the additional documents due by June 15 (e.g., your common application, letters of recommendation, and verification of your work in health care settings). It also includes a portfolio review sometime between February and June (concerning which, see below). The essays and the portfolio review have a twofold purpose. First, they help to inform the Premedical Committee about the candidate it is preparing to support. Secondly, they launch the applicant on a process of self-reflection and self-representation that in time will culminate in the AMCAS personal statement, the secondary application, and the medical school interview. We cannot emphasize enough how important it is to medical school admissions committees to have a thorough understanding of your life experiences and the reasoning behind the choices you’ve made along the way in your own inimitable words (written and oral).

Portfolio Review

At this required meeting (approximately one hour in length), your advisor will review select parts of your portfolio, verify or solidify your application plans, and discuss the application process with you. This is also an opportunity for you to ask questions about your application.

MCAT

The MCAT is the Medical College Admissions Test. The test is largely in multiple-choice format and is administered at test sites on computers. It consists of four parts: Critical Analysis & Reasoning; Biological & Biochemical Foundations of Living Systems; Chemical & Physical Foundations of Biological Systems; and Psychological, Social, & Biological Foundations of Behavior. Each part is scored 118-132.

The MCAT will be offered thirty times in 2024. We recommend that students have an MCAT score by the time they submit the common application. This would mean taking the MCAT before June 2024. If you feel this isn’t feasible, we recommend you take the MCAT no later than the end of June 2024. These dates are advantageous for at least four reasons:

1) **Opportunity to remediate a low score**: If your score on a spring MCAT is below your capability, you still have enough time to prepare to retake the exam without having to postpone your application.

2) **Receipt of MCAT score before submission of AMCAS**: Official MCAT scores are released 30-35 days after the test date. You will have scores from an April or May test by the end of June, if not earlier. Knowing your MCAT score before you submit AMCAS will help you finalize the list of schools you will apply to, and, if the score is much lower than expected, may prompt you to delay applying in the current cycle.

3) **Timely receipt of MCAT score by medical schools**: Scores of tests taken from mid-August on will reach schools while the review of applications is, in many cases, in full-swing. This means that by the time
you could be considered for an interview, the school's pool of interview appointments has been reduced, making the competition for the remaining ones all the keener.  

4) **Secondary applications:** Once you have submitted AMCAS, you will begin to receive secondary applications. It is advisable to complete and submit all secondary applications within one month of receiving them. This can become difficult to accomplish if you are also preparing for an MCAT exam in July or August.

Of course, you shouldn’t take the MCAT unless you’ve been able to devote yourself to thoroughly preparing for it. Our advice about MCAT dates assumes you are able to do a reasonably good job of preparing. Whenever you plan to take the MCAT, we recommend you tell your advisor and talk through the pros and cons of your choice. We also recommend that you speak with your advisor if you earn a score below 508 or receive a single section score below 125. Finally, if you need to take the MCAT for the first time after July 2024, you should plan to defer your application to the next application cycle.

**MCAT Registration: Handle with Care**
When registering for the MCAT (or any other admissions exam), be vigilant about the name under which you register. The government-issued ID you will be asked to present on arrival at the test site must match the registration name exactly. J. Mary Smith is not the same as Mary Smith or Jane Mary Smith.

**MCAT Preparation and Program Planning**
Because the MCAT weighs heavily in the admissions process, we recommend that premeds plan to devote at least three months to preparing for the exam. There is no prescribed way to prepare, and it is left to each student to determine what will best serve their interests. While many students enroll in test prep courses, including those offered in conjunction with GS, others find that studying on their own is most effective.

To free up time in the spring semester to prepare for the MCAT, some premeds exercise the option of postponing organic chemistry lab until the summer. Doing so will not make you ineligible for committee support, but there are implications of postponing required coursework until the summer, including the effects on your MCAT preparation. For example, because the lab is normally taught over the fall and spring semesters during the academic year, a decision to postpone taking it until the summer would have to be made early on. Be sure to discuss any such plans with your adviser.

**MCAT and Test-taking Accommodations**
If you require test-taking accommodations for a disability or a medical condition, it is important to apply for them early. You need to allow time for the professional evaluation you will likely have to include in your application. Further, according to the AAMC, applications for accommodations are reviewed within sixty days of submission. Please consult the following webpage at your earliest convenience for full details: students-residents.aamc.org/mcat-exam-accommodations/mcat-exam-accommodations.

**Admissions Tests for Dental and Veterinary Schools**

**DAT:** Prospective applicants to dental school must take the DAT (Dental Admissions Test), a standardized test covering natural sciences, perceptual ability, reading comprehension, and quantitative reasoning. The test lasts some five hours. Unofficial scores become available almost immediately. For details, visit www.ada.org/en/education-careers/dental-admission-test.

**GRE:** A very few schools of veterinary medicine require applicants to take the GRE (Graduate Record Examination) general exam (they may make an exception for applicants who recently took the MCAT). A very few vet schools may also require applicants to take a subject exam. The general test covers verbal reasoning, quantitative reasoning, and analytical writing. Visit www.ets.org/gre/revised_general/about for details.
Please see the respective timelines for dental and veterinary school applicants for dates by which we recommend the DAT and GRE be taken.

**Choosing Schools**

There are more than 150 accredited schools of allopathic medicine in the US, seventeen in Canada, several dozen additional “off-shore” (for profit) schools, and more than 35 schools of osteopathic medicine. Because the application process is so competitive, it’s important that you apply to enough schools—and enough of a variety of schools—to give yourself a strong shot at getting in; however, that doesn’t mean that the more schools you apply to, the better are your chances of gaining admission. The number of schools you list on AMCAS means very little if you haven’t done research about them and identified those for which you are a good match while also feeling positively drawn to them.

As a first step, we suggest you draw up a long list of, say, thirty schools to which you would consider applying. Ask your premed advisor to review it with you, toward the end of the semester prior to submitting your application and ideally once you have your MCAT score, with an eye to shortening and perhaps modifying it. If you've done your homework and candidly assessed your record, you need not apply to more than about twenty to twenty-five medical schools (the number of schools on a predent’s or prevet’s list will probably be smaller).

There are several resources to aid you in the selection of schools for your long list. The most useful of these, for medical school applicants, is the American Association of Medical Colleges website, [https://students-residents.aamc.org/applying-medical-school/applying-medical-school-process/deciding-where-apply/](https://students-residents.aamc.org/applying-medical-school/applying-medical-school-process/deciding-where-apply/).

The *Medical School Admissions Requirements* (MSAR) helps you compare and contrast schools according to a number of factors.

We hope you also have taken advantage of the Medical School Fair organized by the Postbac Premed Student Council. At this annual event, admissions officers representing a variety of schools are on hand to talk with students about curricula, the admissions process, and how to prepare oneself to be a strong applicant. In the space of just a few hours, you can cover a lot of ground and gain a good feel for quite a few schools.

**Preveterinary Students**

Students can find a list of schools of veterinary medicine at: [aavmc.org/Member-Institutions.aspx](http://aavmc.org/Member-Institutions.aspx). Summaries of prerequisites for individual schools may be found on the schools’ websites. Prevets should also consider subscribing to the *Veterinary Medical School Admissions Requirements* (VMSAR), a web based to have prerequisite information all in one place (see: [https://applytovetschool.org/](https://applytovetschool.org/)). Due to variation in prerequisites, particularly after the completion of organic chemistry and biology, we recommend that preveterinary students consult with their advisors before the orgo/bio year about the schools to which they plan to apply.

**Predental Students**

Predental students will find links to the websites of dental schools currently participating in AADSAS at: [adea.org/dentalschools/](http://adea.org/dentalschools/). The American Dental Education Association’s Official Guide to Dental Schools is available for purchase at: [adea.org/officialguide/](http://adea.org/officialguide/)

**Criteria for Choosing Schools**

There are various criteria to consider in choosing schools to which to apply. Primary among these are the following (while these criteria are explained with reference to medical schools, most remain relevant for dentistry and veterinary medicine, although some of the details will be different):

1. *Academic credentials.* The MSAR will list the mean grade point averages and MCAT scores of entering students, but it is important to remember that admissions committees will also consider the reputation
of the schools you attended, whether you took heavy course loads, whether you have completed recommended course work beyond the minimum requirements for admissions and how much volunteer work you have completed, and among other factors. Even your personal circumstances while in school may be considered (for example, did you have to work?) Include several more and less competitive schools on your list.

2) **Curriculum.** Many schools have revised the classroom years to incorporate early clinical exposure, small-group learning, problem-based or case-based learning, and the like. Ask yourself whether you perform best in a traditional classroom environment, with lectures, tests, and grades, or in a less-structured environment with a pass/fail grading system and more independent study. Compare the number of hours per week and weeks per year among schools’ curricula. The range is quite striking. Along with clinical training as early as the first year, medical schools have introduced other special curricular features such as scholarly projects, dual degree options, or three-year academic programs. Become familiar with these and consider how heavily to weigh them into your decision-making.

3) **Grading.** At some schools, student performance is evaluated with letter grades; at others grading is Pass/Fail or High Pass/Pass/Fail for all or part of the four-year program. Some students may feel that working for a letter grade helps to focus and to motivate them. Others may feel that Pass/Fail grading reduces stress and encourages collaboration and learning for its own sake.

4) **Technology.** What sorts of technological resources are put at students’ disposal? At some schools, tablets are an important tool for students working in gross anatomy lab and many schools use patient simulation robots to teach certain clinical training skills. Web-based access to lecture podcasts is also fairly common and many medical students say they depend on this.

5) **Lecture attendance:** At many schools, where recordings of lectures are available, attendance at live lectures is optional and can be low. Some schools, however, require their students to attend lectures.

6) **Geography.** You may wish to stay close to friends and family (a support network, moral or otherwise), or to have easy access to cultural or outdoor activities. You may prefer an urban life-style or you may be fed up with city life and want more trees and grass.

7) **Class size.** The range is from under 100 to more than 300. What do these numbers mean? Are you taught in small groups, or are the first two years made up of large, anonymous classroom lectures? The school with the largest class size may actually offer instruction in small group settings.

8) **Clinical facilities.** Make yourself aware of the clinical opportunities and the facilities that will be available to you, giving attention to number of beds and patients, as well as the process for selecting cases for teaching.

9) **Clinical vs. research emphasis.** Most schools offer excellent clinical and research training; however, certain schools emphasize one over the other. This is often best determined by speaking with students.

10) **Residence restrictions.** Most public institutions sharply limit the number of out-of-state students they will accept. This generalization varies somewhat state by state, but it may be advantageous to apply to public medical schools in your home state.

11) **Community.** Is there a strong sense of community amongst students? Between students and faculty? Between students and administration? Does the school encourage a strong sense of responsibility to the community in which it resides? Sometimes such commitment may be embodied in student-run free clinics and other opportunities to serve the school’s neighbors.
12) **Cost.** Private schools tend to be smaller and more expensive than public schools, but may be better equipped to provide institutional aid. Financing a medical education may be assisted by school loans and scholarships or government financial aid programs. Most schools do their utmost to make it possible for those they admit to complete their educations. In recent years, a couple of schools have developed means through which to subsidize most of the cost of medical school; a few others have devised ways to guarantee that their students graduate from medical school debt-free.

13) **Underrepresented in medicine.** Most schools have an Office of Multicultural Affairs, which provides guidance to applicants who come from backgrounds historically underrepresented in medicine or who may be socially, economically, or educationally disadvantaged. If you believe you fall into any of these categories, seek out these offices for support and advice.

14) **The faculty.** What are the professional credentials of the faculty? In what sort of research are they involved? What have they published? Where did they attend medical school? Where did they complete their residencies? Such details may provide indications of the faculty’s collegial contacts beyond the medical school. This may add weight to their support of one’s residency application. Additionally, what role do faculty at the school play in mentoring students? Does mentoring occur on an ad hoc basis or is it built into the curriculum?

15) **USMLE performance.** Schools sometimes publish information about the performance of their students on the United States Medical Licensing Examinations (USMLE). This may afford insight into how well the school’s curriculum helps to prepare students for the exams.

16) **Residency matching.** Where schools provide information about the specialties and hospitals in which their graduates are doing their residencies, this may inform your choice of schools. Ultimately one’s residency may be a more important professional credential than one’s medical school alma mater.

**Do not apply to any school you are not prepared to attend, if it should prove to be your sole acceptance.**

**Considerations for International Students**

Residence restrictions and cost are issues that non-US citizens may find especially constraining. Publicly funded institutions generally do not accept non-citizens (there are exceptions). Private schools may accept them; however, because international applicants are ineligible for the Federal financial aid that so many applicants depend upon to pay for their medical education, medical schools may require such students to pay for four years of medical school up front or at least put these funds in escrow. International students should discuss these matters with their premedical advisors.

**What Are They Looking for?**

The selection process for medical schools often strikes premeds as mysterious or at least random. We frequently hear students ask “what are they [i.e., medical school admissions committees] looking for?” Needless to say, they are looking for evidence of your thorough preparation for medical school, as reflected in your grades and standardized test scores. Schools also want to be sure your interest in medicine has a solid basis, that you know what you are getting into, and that you are prepared to make the long-term commitment medical studies demand. That’s why the Postbac Program expects you to do some reality-testing by working in health care settings. Finally, your sterling character and strong interpersonal skills as revealed through your life experiences is absolutely essential, since this will persuade admissions committees that you are not only capable and have made an informed decision, but that you will be a beneficial presence among your future peers in the health care professions and your patients. Beyond these familiar requirements, though, we would discourage you from trying to second guess what medical schools are looking for. Better to ask yourself “what am I looking for?”
AMCAS, or the Common Application

The American Medical College Application Service, better known as AMCAS, is an electronic common application service through which you initially communicate to medical schools your desire for admission. It is subject to updating from one year to the next and most American schools of allopathic medicine will require you to submit it (see below concerning other common application services). Look online for the new AMCAS application in early May (aamc.org/students/applying/amcas/); you can begin completing the application at that time. The earliest date on which the application can be submitted is at the end of May. An application submitted by the end of June is a timely one; but it is advantageous to submit AMCAS as early in the month as possible. For this reason, GS students planning to apply to medical school with committee support are required to submit AMCAS by June 15. If you need more time, you can request an extension (using the extension request form found on your internal application status page) and an extension will be automatically granted until noon on June 30.

The completed application generally runs to twelve pages and includes, among other items:

- Basic personal information such as name, social security number, address, citizenship status, state residency, basic information about your family;
- Your academic record at post-secondary schools;
- An annotated inventory of your most significant activities, accomplishments, jobs, and the like (a.k.a. Work & Activities).
- A personal statement.
- A list of the schools to which you are applying

You can submit your AMCAS application without having taken the MCAT. Once you have an MCAT score, it will be automatically added to your AMCAS application.

Completion of the AMCAS application is a time-consuming, painstaking task. It should not be left to the last moment. The drafts of Work & Activities entries and of the Personal Statement you were required to submit with your internal application in January give you a head start in the process.

Each applicant is assigned an AAMC identification number, which is one of the principal means medical school admissions offices use to identify you and unify the parts of your application. It is a good idea to use this number in all your correspondence with allopathic medical schools during the application period.

Academic Record

Before you sit down to complete the AMCAS application, make sure you have copies of transcripts from every college or university you have ever attended. (Unfortunately, the Columbia Premedical Office is unable to comply with requests for copies of the transcripts you submitted with your application to the Postbac Program.) The most tedious part of the application is filling in all your courses and converting your grades into the standard AMCAS grades. This can be completed in more than one session—AMCAS allows you to log in and out of the site as often as necessary. Do not hesitate to call or email the AMCAS help line if you are unsure how to record something. Errors in your application will delay its processing, so check the information you provide before submitting your application.

You should ask the registrars at each of the colleges and universities you attended to send official transcripts to AMCAS in May, when the new application goes live. (Of course, you should not submit your Columbia transcript until all your spring semester grades have been recorded.) Sending AMCAS transcripts in May will expedite the processing of your application, once you submit it at the end of the month or in June. Please see the AMCAS website for the Transcript Matching Form. You may have your Columbia transcript sent to AMCAS electronically from the following link: registrar.columbia.edu/content/transcripts. On the “Select
Documents” page, be sure to choose the “AMCAS Transcript” option, which includes an electronic version of the Transcript Matching Form. We recommend that you keep on file a second unopened set of transcripts in case a medical school notifies you later on in the application process that it has not received them. (These same general instructions apply to other universities where you may have completed a degree or at least some coursework.) A detailed discussion of which transcripts must be sent to AMCAS and which may be omitted appears on the AMCAS website in the AMCAS Applicant Guide, a document updated annually.

The process of ordering transcripts for the AACOMAS (medical), the AADSAS (dental), the TMDSAS (Texas medical and dental), and the VMCAS (veterinary) common applications is very similar. In most cases, you can submit a TMDSAS (Texas medical and dental school) common application without submitting transcripts. TMDSAS will notify you when to do so.

If you are applying to any schools that do not participate in a common application service, you should carefully check and follow each school’s instructions regarding transcripts. Some may want them initially, while others may want them in time for your interview.

When your AMCAS application is processed, your post-secondary grades are aggregated into three grade point averages: (1) The BCPM, an aggregate of grades in all biology, chemistry, physics, and math courses; (2) AO, an aggregate of grades in all other courses; and (3) a total grade point average. For a variety of reasons, this total may look different from the grade point averages on your transcripts.

Work & Activities
Medical schools want to learn about your interests, achievements, and commitments outside the classroom to better assess your attributes and understanding of the profession you aspire to join. The work and activities section of the common application is a vehicle to communicate such information. In the AMCAS application, you will be invited to submit up to fifteen descriptions of jobs, extracurricular activities, publications, pastimes, awards, and honors you regard as important. In most cases, you will have seven hundred characters in which to describe the experience or distinction; however, you will also be invited to identify up to three that you regard as your most meaningful. For each of these, you will receive an additional 1325 characters in which to account for their importance to you. These three short essays are a great opportunity to shine a light on aspects of your character, growth, and excitement for learning. Because of their importance and of the labor involved in writing them, GS premeds are required to submit a working draft as part of the internal application they submit in January.

Personal Statement
Though a mere 5300 characters long (including spaces and punctuation), the AMCAS personal statement is an open-ended writing exercise that can be challenging to write. (Character limits for other common applications are similar.) It is often regarded as the most important part of the AMCAS application. This is because it helps to distinguish you from every other applicant with similarly strong grades. You may wonder how in the world you are going to come up with an effective statement while taking orgo and bio and preparing for the MCAT. Well, you’ve already given yourself a head start by writing the essays that form the core of the internal application you submitted in January. The writing of those essays tends to initiate a process of self-reflection through which you are able to explain persuasively how you awakened to your interest in a career in medicine and what you have already done to prepare yourself to pursue it. This is not to suggest you should simply strip-mine these essays for your personal statement. Indeed, we are inclined to discourage such an approach. If you try to compose your personal statement by cutting and pasting from these essays, it is likely to read that way. Better to compose a unified statement for the purpose at hand.

Several times each semester, the Postbac Program’s Writing Consultant offers workshops in the writing of the personal statement and the work & activities entries. You can also consult with the Writing Consultant one on one. Secondarily, throughout the academic year, you can meet with consultants at Columbia’s Writing Center on the 3rd floor of Philosophy Hall. Of course, your premedical advisor is also interested to discuss
your personal statement and work & activities entries with you. Indeed, your advisor will want to read the final drafts of these documents before you submit your common application.

**AMCAS Submission**

Once you have submitted your application to AMCAS, you must submit a copy of it to the Premedical Office. (We will not accept applications that have not been submitted to AMCAS. The submission date and time should appear on the first line of the report. If it does not, you may receive a request from our office to resubmit your application.) You must upload this application to your portfolio by June 15. This will help to ensure that your committee letter will be submitted by August 15.

Here’s why we feel so strongly about the June 15 AMCAS submission date:

1. It will likely mean a relatively quick (two to three weeks) verification of your application by AMCAS (because there will likely be fewer applications in the queue at that point); and

2. Assuming your application is quickly verified, it will mean that your application is more likely to be included in the first release to medical schools of verified applications during the last week in June. As a consequence, you may begin to receive secondary applications early in July, and this may enable you to have a completed application early in the summer, which can positively influence your chances of receiving invitations for interviews.

If you need additional time to complete your application, you can request an extension until noon on June 30; however, this may mean that your committee letter is not uploaded until September 1. The extension request form is found on the status page of your internal application. If you plan to take the MCAT after June 15, it may still be in your interest to file your AMCAS application early; however, you should discuss this with your advisor.

Once you have submitted your application, it may take four to six (or even eight) weeks for AMCAS to verify its contents. The academic record in your application is checked against your actual post-secondary transcripts. Once this task is completed (and assuming there are no inconsistencies), your AMCAS application is forwarded to the medical schools listed in your application. Upon receiving it, many schools will send you a secondary application to complete, generally in the form of a website link. Some secondary application links are sent more or less once you submit AMCAS, without waiting for the completion of the verification process. A very few schools screen verified applications and selectively send the secondary link.

**AMCAS Letters of Evaluation Service**

Nearly all AAMC schools receive committee letters and letters of recommendation via the web-based AMCAS Letters of Evaluation Service. When completing the AMCAS application, you are required to indicate what letters of support will be forthcoming. You should list the Columbia University Committee Letter as a single letter, even though it will have several of your letters of recommendation attached to it. You should not secure separate letter ID numbers for the individual letters of recommendation in your file nor should you select the letter packet option, if you are applying with committee support. The committee letter will suffice for your individual letters of recommendation and the committee letter. As the “Primary Author>Contact,” please enter your advisor’s name in the form “Dean [first name] [last name],” e.g. “Dean Limary Carrasquillo.” More information about AMCAS’s letter program is available at: students-residents.aamc.org/applying-medical-school/faq/amcas-faq/.

**Information Release to Columbia University**

In your AMCAS application, when adding Columbia University (undergraduate or postbaccalaureate) to your list of colleges attended, you must authorize AMCAS to release information about your application and MCAT scores to the Premedical Office at Columbia. Having access to this information will enable your
prehealth advisor to advise you through the critical and difficult months of the application year. The GS prehealth advisors cannot advise or support you if you do not release this information.

Adding or Deleting Schools after AMCAS Submission
It is possible to add new AMCAS schools after you have submitted AMCAS. Generally, it is best to do so early in the application cycle. Whenever you add schools, be sure to notify your advisor of the specific additions, if you did not consult with him or her about making them. It is not possible to delete schools once you have submitted AMCAS. If you decide post-AMCAS submission not to apply to a given school, simply decline to complete the secondary application. If you make this decision after submitting the secondary application, please get in touch with the school’s Office of Admission and briefly communicate your decision to withdraw your application.

Non-participating Schools
The vast majority of the medical schools to which postbacs apply each year are members of the Association of American Medical Colleges (AAMC), who accept the AMCAS common application and receive committee letters through the AMCAS Letters Service. There are a number of important exceptions, however. The following is a non-exhaustive list of these schools:

- all the Texas state university medical schools
- University of Puerto Rico School of Medicine (receives AMCAS application, but does not accept letters via the AMCAS letters service)
- St. George’s University School of Medicine
- Ross University School of Medicine
- The University of Queensland School of Medicine in partnership with Ochsner Health System
- Royal College of Surgeons in Ireland
- Trinity College School of Medicine
- schools of osteopathic medicine

If you are applying to Texas state schools or to schools of osteopathic medicine (i.e., schools that use their own application services), please send the appropriate service’s ID number to your advisor and cc gspostbac@columbia.edu. If you are applying to public medical, dental, or veterinary schools in Texas, we recommend that you discuss this with your advisor as early in the spring semester as possible.

AMCAS Guidance
To help you complete the AMCAS application, please consult the AMCAS Applicant Guide available on the AMCAS website. AMCAS also provides a help phone line if you need to speak to someone (202-828-0600).

AMCAS Updates
There may be small, but important changes to the AMCAS application which may not be announced until May, as the new application opens. We will make every effort to inform you when we learn about any changes in the format of AMCAS for the coming application cycle.

Other Common Application Services

- AACOMAS (osteopathic medicine) [aacom.org]
- AADSAS (dental) [adea.org]
- TMDSAS (Texas medical, dental, and veterinary schools) [tmdsas.com]
- VMCAS (veterinary) [aavmc.org]

Students applying through these services complete a single electronic application. Like the AMCAS application, these include a short summary of personal information, a composite academic record, capsule
descriptions of significant experiences and accomplishments ("work & activities"), and a personal statement. Each common application differs, however, in the details and format. Letters of recommendation are also submitted electronically through AADSAS and VMCAS.

Note to Prevets: Letters of recommendation for prevets must be submitted by the referee directly to VMCAS. Submission of copies of these letters to the Premedical Office, while desirable, is not currently required. For more concerning the administration of recommendation letters for prevets, consult with your advisor.

Secondary Applications

Secondary applications (a.k.a. “secondaries”) are the applications of individual medical schools. Many schools issue them to any student from whom they receive an AMCAS application. Some, however, issue them selectively after a screening of the AMCAS application, effectively rejecting those to whom they decline to send them. Which practice a school follows is indicated in its entry in the Medical School Admissions Requirements (MSAR). These secondary applications may arrive immediately upon your submission of AMCAS (e.g., in the form of an electronic link) or four to six weeks after you have submitted your AMCAS application (or, more precisely, soon after your AMCAS application has been verified). They require an additional fee and often consist of several additional essays.

The following are useful points to keep in mind while writing your secondary applications:

- Be prepared to complete them quickly. The sooner you complete them, the sooner you may hear about interviews. Schools vary in how soon they expect you to submit the secondary application once they have sent it to you. Many will expect to receive it within two or three weeks. Others simply have a single fixed deadline. Be sure you know how soon you must return the completed application. Ideally, all your secondary applications would be submitted by early to mid-August.
- In writing essays for your secondary applications, try to go beyond your AMCAS personal statement or Work & Activities to other aspects of your life. If you are asked to describe three personal accomplishments of which you are most proud, focus on accomplishments that will demonstrate your versatility and introduce you personally.
- If a secondary application asks you to name your referees, please confer with your prehealth advisor. In some cases, it may suffice to answer “General Studies Premedical Committee dossier.” (N.B. This instruction does not apply to veterinary school applicants for reasons discussed above.)

Other Proprietary Applications

For those schools that do not participate in a common application service (e.g., international schools), their proprietary application is comparable to the secondary application, and much of the same advice above applies. Even though these schools won’t receive your AMCAS application, you should not simply recycle your personal statement, but rather try to tailor it to the particular school to which you are applying:

- Mention features of the program that attract you and explain why you are a good fit for its particular academic mission. What about this school is especially interesting to you and why? What can you add to the student body that is unique?
- Reveal aspects of yourself that are not readily apparent in your grades. Do not merely rehash your academics.

Applications Copies

Be sure to keep a copy of your common applications, of any non-AMCAS applications, and of all secondary applications you complete.
Other Application Requirements: Online Situational Judgment Tests

In recent years, a growing number of medical schools (45 and counting) have begun to require applicants to take a situational judgment test (SJT), a vehicle for assessing an applicant’s judgment, professionalism, and aptitude for decision-making. Most schools requiring an SJT prescribe CASPer (an acronym for Computer-Based Assessment for Sampling Personal Characteristics), a 90-minute web-based test; a smaller number of schools have begun using PREview, the AAMC’s version of a situational judgment test, which takes one and a half to two hours to complete. The exams are not interchangeable and you may need to take both, depending on the requirements of the medical schools you apply to.

Situational judgment tests are not tests of content knowledge, but of one’s aptitude to choose a course of action in or otherwise respond to hypothetical scenarios. Because these exams are designed to test for such attributes as self-awareness, ethics, empathy, problem-solving, and professionalism, they don’t lend themselves to study. However, it is a good idea to become familiar with the purpose and format of these tests, and also to ponder examples of situational judgment test questions, easily located through a web search. Please see the Casper website for more information about the CASPer, and https://students-residents.aamc.org/aamc-preview/aamc-preview-professional-readiness-exam to learn about the AAMC’s PREview.

Usually, applicants are required to take the medical school’s preferred test before the interview, and at least some schools use the test results to determine whether or not to invite the applicant for an interview. Because CASPer reports scores in two to three weeks and PREview in 30 days, we recommend you take these tests by mid-July, if possible.

Committee Letter & Recommendation Letters

Individual letters of recommendation assess the performance and character of an applicant usually within a single context—an academic course, a job, a volunteer setting, sport, or extracurricular pursuit. By contrast, the letter composed by the Premedical Committee provides a comprehensive portrait of the applicant based on the individual recommendations, post-secondary transcripts, essays, and other materials you have submitted for your file, and the Committee’s personal knowledge of you, the applicant. For a detailed discussion of recommendation letters, consult gs.columbia.edu/content/medical-school-letters-of-recommendation.

What gets sent to the medical school is the Premedical Committee Letter with (generally) four or five individual letters of recommendation attached (but see “Special Letters,” below). Generally, the attachments will include at least two letters from Columbia’s science faculty. Secondary applications will sometimes ask you to list the names of your referees. It may suffice to respond by writing “GS Premedical Committee Dossier.” Where that is not an option, please consult with your prehealth advisor.

To lessen the pressure of the weeks leading up to the June 15 deadline, a time when you may be completing AMCAS and/or preparing to take the MCAT, we encourage, but do not require, you to secure as many recommendation letters as possible by mid-February. Letters are due, however, by June 30. Referees may submit letters through the online internal application system, by e-mail (scanned letters, along with the waiver form, to gs-letters@columbia.edu), or by US Mail. Please do not bring or mail us these letters. We won’t accept them from you or a proxy. They must come directly from their authors.

By the assurance date for which you have qualified, the Premedical Committee will submit your committee letter (see the “Application Timeline & Checklist” document for more details). AMCAS automatically notifies you when your committee letter packet has been received.
MD/PhD Applications
If you are applying to MD/PhD programs, it is important that you bring this to your advisor’s attention as soon as possible because such programs vary in how they would like your letters submitted. It is not unusual for more than four or five recommendation letters to be attached to the committee letter of an MD/PhD applicant because admissions committees will want to hear from as many Principal Investigators and research supervisors as possible.

Special Instructions for Prevets
The format of the GS preveterinary committee letter is tailored to fit VMCAS, the common application system used by most American schools of veterinary medicine; it is therefore different in some respects from the format of committee letters for premeds and preents. The key difference is that a prevet committee letter must be submitted without attachments. In effect, it is submitted in parallel with other letters of recommendation. While prevets are encouraged to ask their referees to submit copies of letters of recommendation to the Postbac Office for our reference, they are not required to do so since we cannot submit these letters on their behalf; rather each referee must submit their letter directly to VMCAS. The applicant must ensure that all necessary individual letters of recommendation are submitted.

Other Special Letters
One of the virtues of the committee letter is that, on the whole, it overrides any particular requirements a medical school may have for letters of recommendation. There are some important exceptions, however, which you may encounter:

• Albert Einstein College of Medicine requires postbac applicants to have the Dean of Students or Registrar at their undergraduate schools submit a letter of good standing. The GS Premedical Office does not typically have such a letter on file (unless it was sent at the time the student applied to the Postbac Program) and does not include it in committee letter packets, so students will usually need to request the letter themselves from their undergraduate institution.

• If the University of Michigan Medical School invites you to interview, it will ask you to identify which four letters (including the committee letter itself) to consider. In this situation, please confer with your prehealth advisor.

• Schools of osteopathic medicine may require or prefer to receive a letter from a doctor of osteopathic medicine supporting your application.

Medical School Admissions Interviews
Once a school has received your common application, secondary application, MCAT or standardized admission test score, SJT score (if required), and committee letter, the admissions committee will begin its review of your application to decide whether to invite you for an interview. You should accept every interview offered to you; interviewing even at schools in which you have limited interest can be a learning experience and an opportunity to hone your interviewing skills. Of course, once you have been admitted somewhere, you may decide to be choosier about which interview invitations to accept. If you have an acceptance in hand and are invited to interview at a school of less interest to you, you can certainly decline the invitation. You can even cancel a scheduled interview at a school, so long as you provide the school with roughly two weeks’ notice. However, you must remember that interviews are a precious and limited resource; an interview cancelled one or two days before it is scheduled to take place is a lost opportunity for the school and another applicant.
How many interviews will you get? GS premeds in recent years who have applied to around 20 schools have typically been invited to two or three interviews. Most interviews take place between September and December, but some schools will continue to interview applicants into early March or even April. Most medical schools, continuing a practice adopted during the COVID pandemic, conduct applicant interviews remotely using Zoom or a similar platform.

If you are invited to two or more on-site interviews at schools in the same remote area, it may be possible to coordinate your visits so that you won’t have to make several long and costly trips. Most schools have shown a willingness to accommodate students where they can. There may be limits, however, to the degree to which medical schools are willing to accommodate your schedule. Premeds who are making plans to spend the application year abroad should discuss them with their prehealth advisors.

Be prepared for a variety of interview atmospheres at different medical colleges. By and large, the days of “stress” interviews are over. Most schools are not seeking to punish you for interviewing with them, but to confirm that you are as articulate, thoughtful, and confident in person as you are in your application. The interview will help them assess your intellectual curiosity and maturity of expression and vision. While you can expect some obvious questions such as “tell me about yourself,” you should be prepared to hold a conversation about your experiences and preparation for medical school, but also on any number of health-care related subjects.

**Interview Types**

In an *open-file* interview, the interviewer has read your credentials and may focus on your academic preparation and your responses to questions on the application. In a *closed-file* interview, where the interviewer is unfamiliar with your application, the process will be largely conversational, sometimes seeming like it has no certain goal. It is important always to demonstrate your ability to listen, to see both sides of any issue, and to defend your opinion on any subject, rather than waffling at opposition to your point of view. Maintaining your focus and composure is the best way to ensure a successful interview.

The Multiple Mini Interview (MMI) is an approach to interviewing that is becoming increasingly common. In the MMI, applicants undergo a series of short (less than ten minute) interviews in which they are presented with an ethical dilemma or other problem to discuss. Such an approach, it is claimed, is advantageous to applicants and to admissions committees because, among other reasons, it is not dependent on the subjective impressions of a single interviewer. For more on the MMI, please consult “The Perplexed Postbac's Guide to the MMI” and the “Comparison Chart: Conventional Interview vs. the MMI” at gs.columbia.edu/content/forms-and-guides.

Information about the interview format at individual medical schools can be found in the MSAR.

**Interview Preparation**

While it is impossible to anticipate every potential question, preparation is still beneficial. After each of your first few interviews, write down the questions you were asked and work on your responses. That way, if similar questions come up in later interviews you will know exactly what you want to say. While it is important to have answers to generic interview questions close at hand, it is imperative that you don’t sound like you are simply playing a recorded answer. If you rehearse, rehearse ideas, not canned answers.

During the fall and spring semesters, the Postbac Premed advisors offer mock interviews. Additionally, our website compiles feedback from our students on their interview experiences at medical schools (see: gs.columbia.edu/content/medical-school-general-admission). We hope you will contribute feedback of your own after each interview.

**Interview Topics**
Topics likely to be touched on during interviews include: your career decisions, your interest in medicine, issues in medicine, issues in health care policy, your background and interests, the schools you have attended, grades and MCAT scores, your family and career plans, ethical dilemmas in and out of medicine, your choice of medical schools, intellectual and academic interests or favorite college courses. It is also not unusual for an interviewer to want to engage in a discussion of one or more current or perennial issues in medicine.

**Interview Tips**

Some tips for ensuring success in interviews:

- Expect to be nervous. Try to be calm. It will be easier to remain calm if you are confident and well prepared.
- Prepare for the interview. Re-read all the essays you were required to submit to the Premedical/Prehealth Committee earlier this year. Read over your AMCAS (or other common) application and the secondary application for the school at which you are interviewing. Review any feedback you received at your mock interview.
- Consult the Postbac Premed website for Interview Feedback: [gs.columbia.edu/content/medical-school-interview-feedback](gs.columbia.edu/content/medical-school-interview-feedback).
- Try to anticipate questions about your decision to pursue a medical career, blemishes in your academic record, your opinions on health care policy, etc. Be ready to give a concise and convincing reason for why you want to be a physician. More generally, be prepared to discuss those life experiences that have informed your decision to become a physician and helped to make you a credible candidate for medical school. This is far better than making unsubstantiated assertions such as “I want to help people,” which won’t serve to distinguish you from other applicants.
- Be ready with some questions about the school at which you are interviewing, e.g., about the clinical exposure students receive or the particular strengths of the school. Avoid asking questions you could easily answer by recourse to the school’s website. If you are interviewed by physicians, consider asking them about their own work, the trajectory of their careers, their current research interests, and the like. An important concern for many premeds is how to balance school and work with family life. Some of your interviewers are likely to have some insights on this subject and may be happy to share them.
- Be prepared with items you might mention unsolicited, whether past accomplishments or new endeavors.
- Dress appropriately and be neat in appearance. Conservative business suits are best for both men and women. This applies even to virtual interviews.
- Be prompt. If the interview is taking place at the medical school, double-check travel and lodging arrangements. Call ahead if you are delayed.
- Be courteous to every person in the office, from the receptionist to the person brewing the coffee. Do not make the mistake of assuming any staff member’s opinion is unimportant. You are being assessed from the moment you arrive until the moment you depart.
- Body language is important: Sit up straight. Smile. Make eye contact. Don’t cross your arms. Don’t cross your legs. Sit with both feet planted on the ground.
- Speak clearly. Try not to sound rehearsed. Know when to stop talking.
- Bring copies of any work you may refer to in the interview.
• Medical school interviewers may use some of the well-known interviewing chestnuts. “Tell me about a time when you failed.” “What’s your greatest weakness?” “Tell me about a time when your presence made a positive difference in a patient’s experience.” “Tell me something you’ve learned about medicine from a patient.” Don’t let such questions take you by surprise. Prepare.

• Don’t be afraid to pause and think before speaking. Give concrete answers, not vague generalities.

• Don’t speak ill of other professions: You don’t know what your interviewer’s spouse does for a living. When speaking negatively, speak subjectively, e.g.: “I think,” or “From my experience, the problem is....” Avoid judgments of other career paths; however, it may be helpful to comment on the goodness of fit (or lack thereof) between you and a given career.

• Don’t be defensive and don’t apologize, even if faced with inappropriate or deliberately provocative questions.

• While the substance of your responses is important, remember that your interview takes place in time and space, or, more importantly, in a social setting. Find ways to connect with or recognize the occasion and its importance. It’s relatively easy to do (although it’s also easy to overlook), and it can even facilitate discussion of complex topics like why do you want to go into medicine?

Preparation for the Multiple Mini Interview (MMI)

Part of the intention behind the use of the Multiple Mini Interview (or MMI) is to involve the applicant in a series of (brief) encounters for which advance preparation is not feasible—or rather, for which the applicant’s prior life experience has been one long preparation. Because each interview is conducted by a different interviewer, the resulting assessment is an aggregate of assessments by several individuals. On the whole, there are no single correct answers to MMI questions. The emphasis is on process (your listening ability, your cogitations, your judiciousness, and ability to integrate new information into your thinking) rather than product (the precise content of your responses). See gs.columbia.edu/content/forms-and-guides for in-depth discussion of the MMI.

As of this writing, some forty-six medical schools use the Multiple Mini Interview sometimes in its pure form and sometimes in combination with more traditional interview methods (see MSAR for details).

After the Interview

Note each interviewer’s name and address (office administrators can usually provide this information) and write to thank them. This may not be feasible in the case of an MMI interview in which the applicant may encounter as many as ten interviewers. In that case, a note to the Director of Admissions may suffice.

Most schools find an email thank-you as acceptable as a handwritten note sent via U.S. mail. However, in the eyes of one admissions dean with whom we discussed this question, email notes, while “acceptable,” are not “special.” Whatever format you choose to use, just be sure to get thank-you notes written and sent within two or three days after your interview. To quote this same dean, “Good manners are always an indicator of personality, yes?”

After each interview, complete the feedback form at the following link and submit it on-line so that we can include it in the interview feedback section: gs.columbia.edu/content/medical-school-general-admission.

Problems at the Interview

While interviews can be intellectually challenging and stressful, interviewers are still expected to be civil, respectful, and fair-minded. Should you encounter an interviewer who is hostile or who uses inappropriate or off-color language, please let your advisor know so that together you can explore your options. Medical schools generally want to know if an applicant encountered untoward behavior at the interview; and some will offer the applicant a second interview. If you prefer that there be no communication with the medical school about the interview, we would, of course, honor your wishes.
The Application/Glide Year

The Application Year (or Glide Year) refers to the time between applying and enrolling in medical school. GS undergraduates may be completing degree requirements. Postbac students may be working full-time in medical research and/or taking biochemistry or upper-level biology courses. Some students may have matriculated into one of the graduate school programs with which the Postbac Program maintains a relationship (Bioethics, Human Nutrition, Public Health, Toxicology). You may also wish to continue or resume service as a volunteer in a clinical health care setting. You should be available for interviews from late September until March of your application year. If you have plans to travel during the application year, be sure to let any school that conducts on-site interviews know when you will be away so that they can factor that into the scheduling of your interview.

If you need to establish state residency, you may have to be present in the intended state for twelve months prior to starting medical school.

Maintenance of Status

If you are a Postbac student applying with committee support, you will be automatically registered for “Maintenance of Status,” a zero-credit course, during each semester of the application year (fall and spring), unless you are taking additional courses at Columbia University. The Maintenance of Status fee ($160 per semester in the 2023-24 academic year) will allow you to retain the essential privileges of being a Columbia student such as email, access to the libraries, and eligibility to join the fitness center, or to receive student health insurance. (Fitness center membership and health insurance involve additional fees.) Should you elect to take further courses at Columbia, your course work will replace your Maintenance of Status for the semesters in question and your tuition bill will be adjusted accordingly.

A Postbac who is reapplying will be enrolled for a second year of Maintenance of Status (unless otherwise enrolled at Columbia).

Taking Additional Courses

Postbacs who plan to take additional courses do not have to take them at Columbia, so long as they have completed the coursework necessary to make them eligible for committee support. This applies especially to prevets, who are generally required to complete one or more upper level biology courses, not all of them offered at Columbia.

Even though BIOL UN2401 is rich in biochemistry subject matter, we still recommend that you take a separate biochemistry course because it is required by more than a dozen schools and recommended by several dozen more (consult the MSAR for this information). Biochemistry is offered at Columbia during fall and spring semesters, and at Barnard College in the fall. We recommend that you take it in the fall of your glide year, if possible, since fall grades during the glide year are more likely to influence admissions decisions favorably than courses taken in the spring. It must be noted that some medical schools recognize that Contemporary Biology (BIOL UN2401) provides good exposure to biochemistry and will therefore exempt applicants from their biochemistry requirement. The Premedical Office keeps on file a letter from one of the professors who developed and taught the course which explains its biochemistry content. This letter can be forwarded to medical schools whenever you seek to resolve this question; however, be advised that each school reserves the right to reach its own decision whether or not to exempt you. In some cases, even where you may be granted an exemption, you may still be expected to take an upper level biology course.

If you have done well through orgo/bio year, the decision to take additional courses depends on your own interests. If you are considering taking additional courses to compensate for soft grades, it is debatable whether these will make a difference. Arguably, it is more likely to help, if you take additional courses at Columbia, rather than at another institution. In any case, if you take additional courses, you must do well;
otherwise, the additional coursework may compromise your record. You get no credit for going above and beyond, unless you do well. We recommend that you take elective science courses for letter grades.

Acceptances and Withdrawals
When an allopathic medical school offers you admission, it typically extends to you a two-week period in which to let it know whether or not you wish to accept the offer, and to submit a deposit. While applicants are invariably excited upon receiving such good news, they also understandably may feel as though they would be getting ahead of themselves to make a commitment to a school when there may be others from whom they have yet to hear. It is therefore important to know that the acceptance of an offer of admission (with the exception of linkage and Early Decision admissions) is generally non-binding until April 30 of the application year and the deposits are refundable until that date at any school whose acceptance the applicant decides to decline. That means that between October 15 and April 30 the applicant can hold multiple acceptances, if necessary. However, with each interview invitation or offer of admission you should review your list of schools and decline the interview and/or withdraw your application from those in which you are less interested, including potentially those that have not yet shown an interest in you. This is especially important at schools where you have been accepted or where you are holding interview spots. This is not only a courtesy: medical schools expect you, as a future physician, to handle all aspects of the admissions process responsibly, and with integrity and maturity, and to conduct yourself in accord with the “AAMC Recommendations for Medical School Applicants” or “Traffic Rules” (see students-residents.aamc.org/applying-medical-school/article/application-and-acceptance-protocols-applicants/).

Once April 30 rolls around and applicants have relinquished all but the one acceptance they intend to keep, medical schools will be in a position to begin admitting applicants on their waitlists. Incidentally, except where an admitted student has elected to withdraw their other applications, this can enable an applicant who, on April 30, has committed to School A, to opt for School B, should it admit them off its waitlist after April 30. The only consequence is that the applicant then forfeits the deposit paid to School A.

For these protocols to work effectively among a cohort of more than 50,000 applicants and to ensure that all available seats in incoming classes be filled, the desired ethical behavior needs to be encouraged far enough in advance of the April 30 date. Hence, the AAMC developed the “Choose Your Own Medical School” tool to encourage students to commit to an individual school early in the spring—even as early as February. Some medical schools may require accepted applicants to use this tool. Others may not. Whether or not it is required by a school, you must take pains to understand the expectations each school has of you once it has offered you admission. Please refer to the detailed discussion of the traffic rules on the AAMC website (students-residents.aamc.org/applying-medical-school/article/application-and-acceptance-protocols-applicants/), and pay careful attention to the policies and procedures of individual schools regarding communicating your commitment to enroll or not.

Caveat on deposit refunds: A significant caveat must be made to the statement on the refund of deposits. It applies to AAMC medical schools only. Schools of osteopathic medicine on the whole do not refund deposits. Further, be advised that their deposits are much larger than those required by AAMC schools ($1,000 or more).

Background Checks
It is common practice for medical schools to conduct background checks on applicants they would like to admit. AMCAS uses a service through which reports of background checks are communicated to medical schools at the point when they are ready to accept the applicant. At the time of your first acceptance, AMCAS will ask you to consent to the background check and the dissemination of the resulting report to any participating school that wants to accept you. For more information about this service, visit students-residents.aamc.org/applying-medical-school/article/criminal-background-check-service/. Some schools participating in this program may also pursue a parallel process of checking.
Application Status
Keep us apprised of the status of each of your applications. You should provide information to your advisor in the Premed Office about your acceptances, withdrawals, and finally, where you have decided to matriculate. Please use the tracking form found on the landing page of the portfolio system to communicate this important information to us.

Staying in touch with your advisor is equally important if time is passing and you have not been invited for interviews, if you receive no acceptances and find yourself stranded on the waiting list of one or more schools, or if you simply hear no news from any school. What may be inferred from any of these circumstances depends in part on the calendar. If you do find yourself lingering on wait lists, it can be helpful to secure an additional recommendation letter or two reflecting your studies or work during the fall semester of the application year. Sending new recommendation letters and updated transcripts (if, for example, you took biochemistry in the fall) can be a positive supplement to your application at those schools that have yet to make a decision. Even without such materials, schools are generally receptive to receiving letters from you in which you reaffirm your interest in the school and update them on your activities. Writing such letters is especially important if you are on a waitlist. Transcripts, additional recommendation letters, and update letters are often sent at the end of the fall, but also in late April or May. Concerning the procedure for having new recommendation letters added to your file in the Premedical Office, see below.

Just as we are interested to learn where you have been accepted to medical school, we are likewise eager to hear where you plan to matriculate. Please let us know! We’d also like to hear whether we can put GS premeds in touch with you in the years ahead when they are applying to medical schools and would profit from learning about their predecessors’ experiences at their chosen medical schools. We would love for our premed alumni to remain connected with the School of General Studies and the Postbac Premed Program.

Sending Application Updates
There is a process of communicating with and updating medical school admissions committees during the application year. The online portals of many medical schools include a section in which applicants are invited to provide updates at any point in the process (except in the case of a rejection). Even where a school’s portal may not include such a section, updating has become an increasingly accepted practice.
There are various ways in which an application may be updated. These include:

1. having an additional letter of recommendation submitted to one’s file (discussed below)
2. sending a new or updated transcript
3. sending publications (especially in digital format)
4. writing an expository/narrative account of one’s work/activities/studies since submitting the application or being interviewed.

Chief among these actions is providing schools with updates about your work or studies. These written updates should focus upon work/activities/studies in which you have been engaged since submitting your application or being interviewed. There is no standardized format for these communications, but we believe that generally it makes sense to state the contexts in which you have undertaken new work, describe or summarize the nature of your work, and explain briefly why it has been of consequence to you as an applicant.

While the substance of the update is important, what is sometimes critical is simply that you remind schools of your continuing interest. When pondering the prospect of initiating communication with a medical school, applicants may wonder: How much is too much? How much is not enough? How much is just right? What is the best time to send an update? Unfortunately, there is no formula through which to answer these questions. We recommend that you consult with your advisor before sending any such communications to weigh the
pros and cons of doing so. Your advisor will also be interested in reviewing a draft of your communication. By the way, not all schools welcome updates, so read a school’s website carefully before sending them.

Additional Letters
It is not unusual for additional letters of recommendation to be received by the Premedical Office after it has sent an applicant’s Committee Letter to medical schools along with selected letters of recommendation. Such letters must be received with the usual waiver form. Normally, such letters are simply filed and no occasion is found to use them. If we receive a letter you believe it is imperative to append to your application, we will upload it to AMCAS, but without screening its content. It is generally our experience that such letters are redundant. To upload an extra letter to AMCAS, we would need you to provide us with a new letter ID. AMCAS allows you to assign the letter selectively, to some schools but not others.

Under certain circumstances, your advisor may recommend that you secure an additional letter of recommendation for the Premedical Committee to send to your schools. It is difficult to itemize all the situations in which this might be advised; however, this might happen if you have not received an acceptance to medical school and are on one or more waiting lists. Such new letters normally ought to bear on research, study, or other significant experiences in which you have been engaged since the submission of the Committee Letter. For this reason, it’s unlikely that an applicant would be able to add a letter of substance before December of the application year.

The Letter of Intent
In a letter of intent, the applicant declares to a medical school that it is the applicant’s first choice and that they are willing to give up any other offers of admission for the opportunity to enroll there. By definition, such a letter can be sent to only one school. Also, several other conditions generally ought to obtain:

- The applicant is waitlisted at the preferred school
- The applicant has been admitted to at least one other school

There is no set time when such a letter is sent, but it is probably not in your interest to send it in the fall, since it may be too early to commit yourself, if you are still waiting to hear back from a number of schools. Further, a letter of this sort seems more likely to have an impact in April or May when admissions committees are beginning to revisit their waitlists.

The GS Premedical Committee is not a strong advocate of letters of intent. It’s our impression that their impact has lessened as their numbers have increased from one year to the next. Also, do not assume that lack of information about a financial aid package when you declare your intent provides you with an “out.” In other words, a declaration of intent ought to be unconditional in spirit. If you declare your intent and are accepted only to find that some other school is offering a better financial aid package, you may be perceived as breaking your word (or, at least, as inclined to manipulate words) if you were to abandon your “intended.”

Rejection
Please be advised that schools may leave your status unresolved until deep into the application year. Note that if it is March and you have not been accepted or waitlisted at a school, then (with rare exception) you should assume you have been rejected.

Applying to medical school can be compared to a game of musical chairs. There simply aren’t enough chairs for all the worthy players. As in musical chairs, it helps to be swift. At the end of the game, there are always potentially excellent candidates left standing. If this is your fate, do not despair. This is not a referendum on your future as a physician. Instead, meet with your advisor to review your application and its timing and discuss what you should do to prepare to reapply. Concerning this important topic, see gs.columbia.edu/content/reapplicants.
The Wait

The application process takes roughly a year to complete. During much of this time, you may find yourself waiting in what feels like unendurable anticipation of responses from the schools to which you’ve applied. While there are no guarantees of a successful outcome, it has been our observation that applicants receive a significant portion of their acceptances from May on. The best thing to do during the doldrums periods is to stay active and involved in personally meaningful pursuits. No matter how your applications are progressing, we encourage you to remain in touch with the Premedical Office. Keeping in touch with us throughout the application year is the best way for you to draw on our resources and expertise.

Coat of Honor

Assuming you are admitted to begin your professional studies a year after submitting your application, you will most likely inaugurate your life as a medical or dental student at the White Coat Ceremony held at many US schools. It’s a joyous occasion and it would mean so much to us to see the smile on your face. Please send us a photo! Also, with your permission, we’d like to include your photo in a gallery of such pictures on our website to inspire current and future postbacs.