

PRE-APPLICATION TIMELINE

FALL SEMESTER

- ☐ If planning to apply for an application fee waiver, look into requirements and deadlines now
- ☐ If you haven't already started researching schools, start now.
 - Attend "Choosing a Strategic List of Schools" workshop or watch video
 - Maintain a spreadsheet to keep track of information about each schools you researched. Be sure to include details such as differing prerequisites and required assortment of LORs.
 - Set a personal schedule to research x number of schools each week.
- ☐ If planning to take the MCAT in January through the end of June of the following calendar year, sign up for the MCAT in mid-October.
- ☐ If you have bandwidth, consider pre-writing school-specific secondary essays as you identify your schools of interest:
 - Tips posted at www.colorado.edu/CEprehealth > Application Tips > Supplemental Applications
- ☐ Use an online "AMCAS GPA Calculator" (Google Sheet) to determine your cumulative undergrad GPA and your science GPA
 - Refer to course classification guide for your field of interest to know which courses to mark as "BCPM" or "Science"
- ☐ Start identifying and contacting potential letter of recommendation writers.
 - You may find it helpful to open a free Interfolio Dossier account. Contact Interfolio Customer Service and ask them to link your account to the CU Boulder Post-Baccalaureate Pre-Health program's administrator account. Upon request, your pre-health advisors can log into the administrator account to double-check on the formatting of your letters.
- ☐ If you haven't yet started a journal of anecdotes/stories you might want to tell in your application or interviews, start this practice now.
- ☐ If are a non-degree student and plan to take more than one calendar year of courses at CU Boulder, schedule an appointment with a Continuing Education Academic Advisor to discuss logistics.

WINTER BREAK

- ☐ Order a personal copy of each of your official transcripts so that you can verify that all entries are correct (if you spot an error, you'll have time to resolve the issue in advance of application season).
- ☐ Attend Part 2 of the Pre-Application Workshop, Part 2 (or watch video) for tips on writing compelling application materials
 - Personal statement
 - Experience descriptions
 - Explanation statements for academic or disciplinary issues
 - Disadvantaged essay
- ☐ Start working 1:1 with Jessica Talbot for individualized coaching on your written application materials
- ☐ If applicable:
 - Apply for AMCAS Fee Assistance Program for your application.
 - Apply for accommodations on your standardized entrance exam (the approval process can take several weeks)
- ☐ Read up on relevant topics (see reading list in this packet: barriers to healthcare access, biomedical ethics, healthcare reform)
- ☐ If you will be taking the MCAT next summer, you may want to use time over winter break to start to prepare for CARS, Physiology, Psychology, and Sociology. (Some people find this timing to be useful; others find it more helpful to take a break.)
- ☐ If you plan to continue taking courses at CU Boulder with degree-seeking status in the fall, complete the CU Boulder transfer student application. (Most people remain non-degree in the summer unless they absolutely need federal financial aid for the summer.)

SPRING SEMESTER

- ☐ Make use of our resources to prepare for interviews:
 - Attend Interview Strategies Presentation or watch the online video version of that presentation
 - Attend Biomedical Ethics presentation
 - Attend Multiple Mini Interview (MMI) Practice Session
 - Mock interview(s) with Jessica Talbot
- ☐ In April, register to take the Altus Suite assessments (Casper and Duet) and (if necessary) AAMC PREview in early July (or before)
- ☐ Finalize your list of schools
- ☐ Ensure that your letters of recommendation are coming in as planned.
 - Former teachers/supervisors: It is typical to give them 2-3 weeks to write your letter
 - Current teachers/supervisors: Ask them to complete by the end of May, if possible. (Your real goal is for all letters to be submitted by the end of July or early August, but this timing allows plenty of buffer room.)
- ☐ **Plan for your application year:** Select academic, work, and volunteer activities that will continue to strengthen your candidacy in case you need to reapply.
- ☐ If you have bandwidth, consider pre-writing some secondary essays:
 - Tips for responding to common prompts posted at www.colorado.edu/CEprehealth > Application Tips > Supplemental Apps

APPLICATION SUMMER

ALL COMMON APPLICATIONS *EXCEPT* AMCAS AND TMDAS:

- ☐ 3 weeks *before* you plan to submit your common application: Apply for application fee assistance programs if you believe you qualify.
- ☐ If taking the DAT/PCAT/OAT/GRE during your application summer:
 - After finals, take a mini-vacation for the rest of that week, then transition to focused test prep while finalizing application materials
 - For DAT/OAT/PCAT: Plan to complete ~300 hours on dedicated test prep
 - DAT: Take by end of June
 - OAT and PCAT: Take by mid-September
 - For GRE: Plan to complete ~150 hours on dedicated test prep. Take by mid-August
- ☐ Finalize and submit common application
 - CASPA: Submit by end of June (if applying to rolling admissions schools) or end of August (for deadline-based schools)
 - AACOMAS, OptomCAS, PTCAS, and VMCAS: Submit by mid-August
 - PharmCAS: Submit by mid-September
 - CASAA: Submit by end of October
- ☐ Within the 2 weeks *after* submitting your common application:
 - Prepare for and take the Altus Suite assessments (Casper and Duet)
 - Ensure all letters of recommendation have been submitted
- ☐ Complete each supplemental application within 2-3 weeks of being prompted to do so. (Note: Each school typically requires 2-4+ additional essays to write at this stage.)

AMCAS and TMDAS:

For those applying through AMCAS, note important dates:

- ☐ First week of May: AMCAS opens
 - The first thing to do is to fill out the Schools Attended section and to arrange for your **transcripts** to be sent from the Registrar's Office at each of your schools to AMCAS.
- ☐ Last week of May: Earliest date you can submit AMCAS
- ☐ Last week of June: AMCAS starts sending processed applications to medical schools

May

- ☐ If taking the MCAT during your application summer:
 - After finals, take a mini-vacation for the rest of that week, then start studying full-time for MCAT while finalizing application materials

June

- ☐ Finalize and submit AMCAS (and, if applicable, TMDAS) application by **June 15** (if you feel confident about it, you can always submit it earlier than that)
 - If also applying to DO programs, submit AMCAS/TMDAS first, then be sure to submit AACOMAS by July 15 (earlier is great if you're ready)
- ☐ Take MCAT by the **end of June**

July

- ☐ July is going to be your big month for writing secondary essays. You'll receive an initial flurry of secondary applications as soon as medical schools receive your verified application. (If taking the MCAT at the end of June, ignore the secondaries until after the MCAT.) The rest will come in one-by-one for the rest of July and potentially into August. **It is important to complete each secondary application (thoughtfully and carefully) within 2-3 weeks of receiving it. Expect to write 2-4+ essays per secondary application.** (For this reason, Dr. Cripps and Jess recommend that you apply to no more than 15 schools unless you will be pre-writing the bulk of your secondary essays before July.)
- ☐ Take the Casper test by the end of the **first week of July**
- ☐ Take the Preview by **mid-July** if applicable to you (check current list of schools that require/recommend it)
- ☐ Follow up on LORs if not complete – actual goal is for all LORs to be submitted by mid-August, but aim for end of July so that you have some buffer room



READING LIST FOR ASPIRING CLINICIANS

Stay up-to-date on current healthcare topics:

- *The New York Times'* online Health section offers current, interesting, health-related news stories.

Be aware of issues pertaining to health disparities and unequal access to health care

- Do an online search for *Access to and Quality of Health Care*, by José J. Escarce and Kanika Kapur, which summarizes the main factors that can prevent people from accessing health care. (Although this article focuses on Hispanics in the U.S., their conclusions apply to the experiences of anyone in a group that experiences barriers to health care.)
- The CDC Health Disparities and Inequalities Fact Sheet provides a comprehensive introduction to the main issues in the topic area of health disparities
- Specific topic areas:
 - Minority health: <https://www.cdc.gov/minorityhealth/>
 - Healthcare and homelessness: <https://www.nhchc.org/resources/general-information/faq/>
 - Trans health: <https://www.amsa.org/advocacy/action-committees/gender-sexuality/transgender-health/>
- The CDC's Health Equity Blog provides a number of interesting readings on these topics

Be ready to discuss biomedical ethical topics

- Read *A Practitioner's Guide to Ethical Decision Making*, by Holly Forester-Miller and Thomas Davis for a solid introduction to this topic area (https://www.counseling.org/docs/ethics/practitioners_guide.pdf?sfvrsn=2).
- The editors at JSTOR have created the following guide to essential readings in the field of bioethics: https://daily.jstor.org/bioethics-key-concepts-research/?utm_term=ESSENTIAL%20READINGS%20IN%20BIOETHICS&utm_campaign=jstordaily_03152018&utm_content=email&utm_source=Act-On_Internal&utm_medium=email
- The University of Washington School of Medicine's *Ethics in Medicine* website discusses each of the hot topics in biomedical ethics
- The AMA *Journal of Ethics* releases an issue each month that delves into a variety of specific biomedical ethical topics
- Do an online search for a profession-specific ethics handbook for your desired field.

Health Care Reform

- This topic is evolving quickly. The best approach is to stay up-to-date on the news surrounding health care reform efforts.
- Be conversationally familiar with the main provisions in the Affordable Care Act and the rationale behind them. Start here for a balanced introduction to this topic: <https://healthcare.procon.org/>

Additional topic area for pre-dental students:

Be aware of the relationships between oral health and systemic health:

- As a starting point, this webpage provides a general overview: <http://www.mayoclinic.org/healthy-lifestyle/adult-health/in-depth/dental/art-20047475?pg=2>
- Next, search for more information on topics that interest you on the ADA website: <http://www.ada.org/en/member-center/oral-health-topics>

GUIDELINES FOR WRITING COMPELLING LETTERS OF RECOMMENDATION

To Prospective Recommendation Writers:

We recognize and appreciate the substantial time commitment that is required to write letters of recommendation for students who are applying to professional school. Each applicant is required to have a set of three to five letters of recommendation submitted in support of their application. Each individual recommendation letter is expected to speak to the specific context in which the author interacted with the applicant; taken as a group, the student's set of letters can provide the admissions committees with a well-rounded impression of the applicant's key competencies, their readiness for professional school, and their suitability for a service-based profession. The relative strength of a candidate's letters of recommendation makes a significant impact on the candidate's likelihood of acceptance to professional school.

We have provided the tips and guidelines below to support you in the effort to write letters of recommendation for applicants to professional school. If you have further questions, we are happy to talk with you and to provide you with feedback on your drafts. You may reach the Continuing Education Pre-Health Advising team at ceprehealth@colorado.edu.

Before you agree to write a letter of recommendation for a candidate:

- Please review the list of competencies on the pages that follow. The most compelling letters of recommendation are those that address three or more competencies from that list, as supported by specific, illustrative examples and anecdotes from the author's direct observation of the candidate. If you are not in a position to provide examples from direct observations within those competency categories, it is best to decline to write a letter.
- During the professional school application process, candidates must meet strict deadlines. If circumstances prevent you from writing a detailed evaluation within the time frame requested by the candidate, it is best to decline to write the letter.
- It is common for our students to use Interfolio to collect their letters of recommendation in advance of the opening of the professional school application season. Applicants are not able to view their letters in Interfolio, but University employees with administrator access to Interfolio are able to view our students' letters. We routinely view letters to ensure that they meet formatting guidelines while maintaining a strict policy of confidentiality regarding the content of those letters.

Logistics:

- Letters must include a **date**, a **handwritten signature**, and business/university **letterhead**.
- **Your letter will be sent to multiple schools.** Please use a general greeting such as "Dear Admissions Committee:" rather than addressing one particular school.
- Aim for a text length of ~¾ to 2 pages.

Letter Writing Tips:

- **Provide context:** Indicate how long you have known the applicant and the context/setting in which you interacted.
- **When providing examples/anecdotes describing the candidate's competencies, consider including the following information:**
 - The specific situation or context
 - A description of the behavior(s) you observed
 - The result or outcome of that behavior
 - (If applicable) Share observations of the ways the candidate grew or changed as a result of the experience
- **Admissions committees find comparison information helpful.** If you feel it would be supportive to the applicant, it can be useful to identify the comparison group (e.g., students in a class you taught, students in your department, co-workers, etc.) and to rank the candidate's performance within that group.
- **There is no need to summarize other aspects of the candidate's preparation for professional school,** as the candidate's application will provide explanations of those activities and the admissions committees will have full access to the applicant's transcript and standardized test scores.
- **Prior to sharing information that could be considered sensitive,** confirm with the applicant that they are comfortable with the inclusion of that information.

Thank you for your assistance!

Core Competencies for Entering Professional School Students in Healthcare

(adapted from the Association of American Medical Colleges' list of core competencies)

Aim to comment upon behaviors you've directly observed from three or more of the categories on this list, providing specific, illustrative supporting examples/anecdotes.

Understanding of and suitability for the profession:

- If you have interacted with this applicant in a clinical setting, please describe what you have observed of the candidate's understanding of the realities of the profession, their expression of intellectual curiosity in the clinical setting, and their approach to interacting with patients and staff.

Service Orientation

- Showing a commitment to something larger than oneself; demonstrating dedication to service and a commitment to making meaningful contributions that meet the needs of communities.

Empathy and Compassion

- Recognizing, understanding, and acknowledging others' experiences, feelings, perspectives, and reactions to situations; being sensitive to others' needs and feelings; and demonstrating a desire to help others and alleviate others' distress.

Cultural Awareness

- Appreciating how historical, sociocultural, political, and economic factors affect others' interactions, behaviors, and well-being; valuing diversity; and demonstrating a desire to learn about different cultures, beliefs, and values.

Cultural Humility

- Seeking out and engaging diverse and divergent perspectives with a desire to understand and willingness to adjust one's mindset; understanding a situation or idea from alternative viewpoints; reflecting on one's values, beliefs, and identities and how they may affect others; reflecting on and addressing bias in oneself and others; and fostering a supportive environment that values inclusivity.

Interpersonal Skills

- Demonstrating an awareness of how social and behavioral cues affect people's interactions and behaviors; adjusting behaviors appropriately in response to these cues; recognizing and managing one's emotions and understanding how emotions impact others or a situation; and treating others with dignity, courtesy, and respect.

Teamwork and Collaboration

- Collaborating with others to achieve shared goals and prioritizes shared goals; adjusting role between team member and leader based on one's own and others' expertise and experience; sharing information with team members and encouraging this behavior in others; and giving and accepting feedback to improve team performance.

Oral Communication

- Effectively conveying information to others using spoken words and sentences; actively listening to understand the meaning and intent behind what others say; and recognizing potential communication barriers and adjusting approach or clarifying information as needed.

Ethical Responsibility to Self and Others

- Behaving with honesty and integrity; considering multiple and/or conflicting principles and values to inform decisions; adhering to ethical principles when carrying out professional obligations; resisting pressure to engage in unethical behavior; and encouraging others to behave honestly and ethically.

Reliability and Dependability

- Demonstrating accountability for performance and responsibilities to self and others; prioritizing and fulfilling obligations in a timely and satisfactory manner; and understanding consequences of not fulfilling one's responsibilities to self and others.

Resilience and Adaptability

- Persevering in challenging, stressful, or ambiguous environments or situations by adjusting behavior or approach in response to new information, changing conditions, or unexpected obstacles, and recognizing and seeks help and support when needed; recovering from and reflects on setbacks; and balancing personal well-being with responsibilities.

Commitment to Learning and Growth

- Practicing continuous personal and professional growth for improvement, including setting and communicating goals for learning and development; reflecting on successes, challenges, and mistakes; pursuing opportunities to improve knowledge and understanding; and asking for and incorporating feedback to learn and grow.

Critical Thinking

- Using logic and reasoning to identify the strengths and weaknesses of alternative solutions, conclusions, or approaches to problems.

Quantitative Reasoning

- Applying quantitative reasoning and appropriate mathematics to describe or explain phenomena in the natural world.

Scientific Inquiry

- Applying knowledge of the scientific process to integrate and synthesize information, solve problems, and formulate research questions and hypotheses; being facile in the language of the sciences and using it to participate in the discourse of science and explaining how scientific knowledge is discovered and validated.

Written Communication

- Effectively conveying information to others by using written words and sentences.

Living Systems

- Applying knowledge and skill in the natural sciences to solve problems related to molecular and macro systems, including biomolecules, molecules, cells, and organs.

Human Behavior

- Applying knowledge of the self, others, and social systems to solve problems related to the psychological, sociocultural, and biological factors that influence health and well-being.

Factors that would allow the applicant to make unique contributions to the profession

- **If applicable, describe obstacles that the applicant had to overcome** and how those obstacles led to new learning and growth.
- **If applicable, explain how the applicant may contribute to a professional school's diversity**, broadly defined (e.g., background, attributes, experiences, etc.)

LETTERS OF REC: CONFIDENTIAL VS. NON-CONFIDENTIAL

Under the provisions of the Family Educational Rights and Privacy Act of 1974 (FERPA), you are guaranteed the right of access to the contents of any evaluation letter you request from a recommender unless you specifically waive that right.

Professional schools typically have a strong preference for confidential letters (that is, letters for which the applicant has waived his/her right to read the letter) because they assume that confidential evaluations will be more candid. As a result, more weight may be assigned to such letters. The vast majority of letters submitted to professional schools are do so with a confidentiality agreement in place.

However, you should consider the pros and cons of keeping and waiving your right to read your letters of recommendation and make the decision that makes you feel most comfortable. Whatever your decision, you should apply that decision to ALL of your letters – you should either keep your right to read ALL of your letters or waive your right to read ALL of the letters.

FACTORS TO CONSIDER IN DECIDING TO RETAIN ACCESS

- You will know the information schools have and therefore can prepare for interviews accordingly.
- It may relieve stress and anxiety to know exactly what has been said.
- Factual mistakes in the letter can be corrected, if the writer chooses to make those corrections.
- If you conclude that the letter is unfavorable, you can choose not to have it sent out. (If you are participating in our Committee Letter/Pre-Health Advisor Letter Process and decide to retain access to your traditional letters, please arrange to review them *before* a final copy is sent to our office.
- By reading a subjective evaluation, you have a chance to benefit from criticism.
- Be aware that a potential recommender may choose not to write a letter for you if you retain access.
- If you retain access, you need to be prepared to explain your reasons for your choice during interview(s).
- If you retain access, a member of an admissions committee at a health professional school receiving the letter might tentatively draw one or more of the following conclusions:
 - The evaluation may be less candid because the writer knew that the student would see it. As a result, less weight may be assigned to such letters.
 - The student wanted to discuss the letter with the recommender/evaluator before the final draft was written.
 - The student feels a moral obligation to exercise his/her civil rights.

FACTORS TO CONSIDER IN DECIDING TO WAIVE ACCESS

- If your recommender knows you well, and has said that he/she can write a letter in support of your candidacy, you may feel reassured that the person will not include inaccuracies or unfair statements in the letter.
- If you waive access, a member of an admissions committee might tentatively draw one or more of the following conclusions:
 - The student has nothing to conceal
 - The student has confidence in her/his ability to choose recommenders and did not feel it was necessary to review the letter before it was sent.
 - The student does not feel a moral obligation to exercise his/her civil rights in this way.
 - (It is, of course, impossible to know how each individual receiving the letters may react to the fact that a student did or did not exercise their rights under FERPA.)

PRE-APPLICATION SELF-ASSESSMENT

1. COMPETITIVE GPA

By the time you submit your professional school application, your GPA should meet one of the following standards:

- ☐ *Ideal:* Your cumulative *and* science GPAs meet or exceed the averages for accepted students at each of your schools

OR

- ☐ Your cumulative and science GPAs are both above 3.0 AND
- ☐ In each of the four full-time semesters leading up to application time, your term GPAs (both overall and science) meet or exceed the national averages.

National GPA averages for accepted applicants, by field:

- Certified Anesthesiologist Assistant: 3.5 overall, 3.5 science
- Dentistry: 3.5 overall, 3.5 science
- D.O. Physician: 3.5 overall, 3.4 science
- M.D. Physician: 3.8 overall, 3.7 science
- Naturopathic physician: varies by program, range is 3.1 to 3.4 overall
- Nursing: varies by program, but range is 3.0 to 3.7
- Optometry: varies by program, range is 3.0 to 3.6 overall
- Pharmacy: 3.4 overall, 3.2 science
- Physical Therapy: 3.6 overall, 3.4 science
- Physician Assistant: 3.5 overall, 3.5 science
- Veterinary Medicine: 3.6 overall, 3.5 science

2. EXPERIENCE CRITERIA

You are on track to be a competitive applicant if, by the time you submit your professional school application, you meet the following standards:

- ☐ Score "2" or higher in at least three categories, including Direct Patient Interaction.
- ☐ Total score of 8 or higher.

Category	Rating
Shadowing/Scribing	
Direct Patient Interaction	[Min: 2]
Non-Clinical Interpersonal Service	
Experience with People in Marginalized and/or Vulnerable Populations	
Leadership and Collaboration	
Research	[If MD only, Min: 2]
TOTAL	[Min: 8]

DEFINITIONS OF EXPERIENCE CATEGORIES

Clinical Shadowing/Scribing

Shadowing is the observation of a health care clinician while that individual cares for and treats patients. Scribing typically falls under this category. You should be able to articulate why you are drawn to your specific intended field, as compared to other clinical, scientific, and service-based professions. You also should be ready to articulate what you have observed about effective, compassionate approaches to caring for patients.

Direct Patient Interaction

Direct patient interaction is defined as being in a position to offer comfort and moral support to conscious patients (and, for pre-vet students, human clients) in a health care environment. It may include attending to patients' health maintenance, progression, or end-of-life needs. It is important that you be comfortable working with and around patients who are sick and injured. It may include hands-on involvement (as appropriate to level of training).

Direct patient exposure can be gained in a variety of ways, such as volunteering or working in hospitals, emergency rooms, clinics, nursing care facilities, or hospice. This category does *not* include indirect patient interaction, such as housekeeping (cleaning operating or patient rooms) or staffing the hospital information desk.

You should be able to share meaningful interactions you have had with patients in clinical settings, identifying how those experiences not only reinforced your interest in entering a clinical career but also informed your approach to caring for patients and their loved ones.

- **Most fields:** By time of application, competitive applicants will have spent *at least one year* (often more) volunteering or working for 4+ hours/week in a direct patient interaction role, within the past two years.
- **Pre-PA and Pre-Vet:** Most successful applicants will have spent over 1,000 hours (national average for accepted students is typically closer to 2,000 hours by application time) volunteering or working in a hands-on patient care role, within the past three years.

Non-Clinical Interpersonal Service

Professional schools select applicants with a long history of serving in jobs and volunteer roles that put them in a position to help other people directly. Examples include retail/restaurant jobs; working as a teacher, tutor, or mental health counselor; serving as a coach, outdoor trip leader, or church group leader; etc. You should be able to articulate why you are motivated to work in a service-based profession and why you find it meaningful.

Experience with People in Vulnerable and/or Marginalized Populations

Clinicians are responsible for serving each of their patients in a respectful manner. Your future patients will hail from a wide range of backgrounds and will represent a rich diversity of life experiences, values, and belief systems. Thus, professional schools are interested in candidates who have gone out to their way to get to know and be of service to people of differing socioeconomic status, race, ethnicity, citizenship status, gender identity/expression, sexual orientation, education level, language, family structure, age, size, political affiliation, religion, and ability/disability. In particular, professional schools value experiences that have given you insights into the needs and challenges faced by those who are members of vulnerable and/or marginalized populations.

Leadership and Collaboration

Leadership is a process of social influence that maximizes the efforts of others, toward the achievement of a goal. Leadership capacity can be demonstrated in a variety of ways, including formal leadership roles in student groups, at work, in volunteer roles, and on athletic teams. You should be prepared to articulate your personal style of effective leadership.

Likewise, strong applicants will be individuals who gravitate toward collaborative, supportive interactions with others. You should be able to articulate why you value collaborative environments. Be ready to provide examples of times when you engaged in effective collaboration despite initial challenges.

Research and Scholarly Inquiry

Research is defined as involvement in a scholarly or scientific hypothesis investigation that is supervised by an individual with verifiable research credentials. Research may be in any discipline and performed at any site, but *it generally involves the testing of a hypothesis*.

Pre-Vet students only: Animal handling experience

Animal handling experience is defined as formal animal care positions that are not classified as "clinical" or "research." They include dog walking and cat care positions at a humane society, working in a doggie daycare facility or on a farm, volunteering at an animal sanctuary, or participating in 4-H. Owning a pet does not qualify. This category is not listed on the rubric below, but competitive pre-vet applicants will have spent over 1,000 hours working or volunteering in animal care roles, with large *and* small animals.

EXPERIENCE EVALUATION RUBRIC

Category			1 – Sufficient	0 – Limited or None
Clinical Shadowing/ Scribing (within past 3 years)			<ul style="list-style-type: none"> • 3 or more clinicians • Multiple specialties and professions -OR- hundreds of hours in a single specialty • Articulates thoughtful reflection on best practices in patient care • Articulates insights into the challenges/rewards inherent to chosen profession • Expresses developing understanding of the roles of different members of healthcare team. Cites strategies for responding to challenges in profession 	<ul style="list-style-type: none"> • No shadowing OR • 1-2 clinicians • Similar or different specialties • Starting to articulate insights from the experiences

Category	3 - Outstanding	2 - Competitive	1 - Introductory	0 – Limited or None
Direct Patient Interaction (emphasis on past 2-3 years)	<ul style="list-style-type: none"> • Engaged in meaningful, ongoing patient interaction for an extended period of time (typically years, not months) • Expresses nuanced insights into the experiences of patients • Exhibits thoughtfulness about how to interact with patients • Articulates the ability to adjust approach with patients depending on situation • Demonstrates passion for patient care 	<ul style="list-style-type: none"> • Engaged in regular, ongoing clinical experiences, typically for more than one year by time of application • Primary form of engagement with patients is through simple, straightforward interactions • Expresses a developing understanding of the experiences of patients 	<ul style="list-style-type: none"> • Introduced to the clinical setting through limited/short-term patient interaction experiences • Insights into profession are typically characterized by watching others respond, rather than from first-hand patient interactions 	<ul style="list-style-type: none"> • No patient interaction
Non-Clinical Interpersonal Service	<ul style="list-style-type: none"> • Consistently involved in non-clinical interpersonal service roles for many years (paid or unpaid) • Articulates personal motivation to be of service to others • Clearly committed to a certain service activity 	<ul style="list-style-type: none"> • Regular involvement in non-clinical interpersonal service roles, typically over a period of one or more years (with emphasis on recent years). • Articulates personal motivation to be of service to others 	<ul style="list-style-type: none"> • Has spent some time (typically less than one year) in one or more non-clinical interpersonal service roles, but this has not been a primary area of focus. • Developing ability to articulate motivation to help others 	<ul style="list-style-type: none"> • No or sporadic involvement in interpersonal service roles.

Category	3 - Outstanding	2 - Competitive	1 - Introductory	0 – Limited or None
Experience with People in Vulnerable and/or Marginalized Populations (emphasis on past 2-3 years)	<ul style="list-style-type: none"> Consistently engaged in meaningful interpersonal service roles that provide deep insight into the lives of people from vulnerable and/or marginalized backgrounds (typically over a period of years) Recognizes and appreciates patterns of difference among people of different backgrounds Exhibits caring and empathy for people of various backgrounds Aware and sensitive to the manner in which own background, belief system, and experiences informs own attitudes and behaviors Able to consider alternative perspectives and modify own behavior in response to differing cultural norms 	<ul style="list-style-type: none"> Has spent a period of time (typically several months) that provided insight into the lives of people in vulnerable and/or marginalized populations. Recognizes and appreciates patterns of difference among people of different backgrounds Exhibits caring and empathy for people of various circumstances and backgrounds 	<ul style="list-style-type: none"> Limited involvement in a service activity that provides insight into the lives of people from vulnerable and/or marginalized populations Developing an understanding of the differing needs of people in groups other than one's own 	<ul style="list-style-type: none"> No direct experience with people of vulnerable and/or marginalized populations
Leadership and Collaboration (emphasis on past 5 years)	<ul style="list-style-type: none"> Held formal leadership position with a purpose of guiding/ directing others for an extended period of time (typically 2+ years) Clearly articulates personal approach to effective leadership and collaboration, as informed by extensive experience 	<ul style="list-style-type: none"> Held a formal position of responsibility with a purpose of guiding/ directing others, typically for 1+ years Able to articulate personal philosophies of effective leadership and collaboration, as supported by concrete experience 	<ul style="list-style-type: none"> Held a short-term position of responsibility with a purpose of guiding/directing others Able to articulate contributions as a leader Able to articulate approach to collaborating with others 	<ul style="list-style-type: none"> Limited or no formal leadership experience and/or Limited or no formal collaborative experience
Research (emphasis on past 2 years)	<ul style="list-style-type: none"> In addition to criteria listed in the "Average" column, has taken intellectual ownership of a research project, including literature review, experimental design, data interpretation May have presented at conferences May have published article(s) in peer-reviewed journal(s) 	<ul style="list-style-type: none"> Intellectually engaged in research: regular attendance at lab meetings and/or journal club Knows how to read/understand primary literature and critique experimental design Able to troubleshoot when the unexpected occurs May have written successful grant proposal to support work 	<ul style="list-style-type: none"> Had an introduction to research outside of "cookbook"-style laboratory course settings Focus is on carrying out research methods May have completed a literature review 	<ul style="list-style-type: none"> Limited or no research experience outside of laboratory course settings



GUIDELINES FOR WRITING YOUR PERSONAL STATEMENT

CONSIDER ADDRESSING THE FOLLOWING TOPICS IN YOUR PERSONAL STATEMENT

1. What led you to become interested in a career in healthcare in the first place?
2. Of all of the healthcare careers, what are unique elements of the one you've chosen that makes it the best fit for you?
3. How have your clinical experiences:
 - o Confirmed your commitment to a career focused on effective, compassionate care of sick and injured patients?
 - o Informed your guiding principles for patient care. (Your own experiences with direct patient interaction are most important, but you also may (briefly) cite the examples set by the clinicians you've shadowed.)
4. What are some of the impactful non-clinical experiences that have informed your personal strengths, values, and motivations?
 - o If you are changing careers, what were the aspects of your former career that you found fulfilling? (Of course, it is most relevant to cite the aspects that will translate to a career as a clinician.) Yet, what was missing? (Be brief on this point.)
5. Why are you excited about the science of the human body? The reader should understand why you are drawn toward a clinical career that requires a master's or doctoral-level education in the sciences.
6. What is the impact you hope to make in your future work as a clinician? You should convey how you hope to do better than simply becoming a competent clinician: What needs do you hope to address? What you say here should follow naturally from the experiences listed in your application. Potential topics could include:
 - o The personal approach you intend to take to patient care
 - o A strong interest in caring for patients in a special population (such as pediatric or geriatric patients, people with physical or developmental disabilities, people in underserved rural or urban communities, etc.)
 - o Conducting research in your field and/or serving on the teaching faculty of an academic institution
7. If you have overcome personal hardships, challenges, or obstacles that may have influenced your educational pursuits, or if you had significant fluctuations in your academic record, briefly acknowledge them to provide context. (You may be given additional space to provide more details in a separate section of the application.) This topic should not be a primary focus of the essay.

HOW TO ADDRESS THESE TOPICS

- As you get started, do some soul-searching: *Why* are you motivated to pursue this career? Which of your experiences have confirmed how and why you want to do this work? (In addition to introspection, consider stepping out of your own perspective by speaking to loved ones and trusted mentors: Ask them why *they* think you are a good fit for this career.)
- Although it's important to orient the reader by explaining how you first became interested in a career in healthcare (in general) and this particular career (specifically), these topics should take up no more than about ¼ of your essay.
- The bulk of your personal statement should be devoted to discussing a few of the most meaningful experiences you've had on the pre-health path:
 - o What are the top 3 to 4 common themes or motivations that have guided your choice of activities over the years?
 - o How have your experiences shaped your values and your personal development?
 - o How have your clinical experiences informed your career choice?
- In your essay, share a series of illustrative **anecdotes** that illustrate your motivations. Anecdotes help the reader get a sense of who you are as a real person. Making use of anecdotes and providing is also an effective way to convey your personal characteristics, values, and motivations without giving the impression that you are bragging.
 - o Often, the most effective anecdotes are ones that describe situations that would have appeared mundane to an outside observer but were deeply meaningful to you. Share a few specific experiences that embody the essence of why—or how—you are motivated to do this work.
 - o When choosing which anecdotes to share, it is generally more compelling to bring up stories from activities in which you had a high level of competence, rather than stories from one of your first experiences in a given role.
 - o For anecdotes involving a patient, give them a name (but make it a short name). To indicate that the name is an alias, use quotation marks around their name the first time you use it.
 - o Pro Tip: Throughout your pre-health preparation, use the Voice Memo app on your phone to record anecdotes from your patient interaction experiences at the end of clinical days. Transcribe by playing the recording to Google Docs.

RECOMMENDED RESOURCES

- AAMC Advisor Corner: Crafting Your Personal Statement
- *The Premed Playbook: Guide to the Medical School Personal Statement*, by Dr. Ryan Gray. Detailed suggestions and examples.
- *Writing Guidelines: Medical School Personal Statements*, Ohio Wesleyan University (free download): 73 pages of advice!

ADDITIONAL TIPS

- Most people will write and revise 10+ drafts before they are happy with the final product. As you work on your essay, ask for feedback from other people:
 - Does the “voice” in the essay sound like you?
 - Ask your readers to summarize the main takeaways they gained from the essay . . . does their list match what you were hoping to convey?
- General Rule: If you find yourself making a general statement that any other applicant could make, that is your signal to develop that thought further so that you share your personal, specific reflections on your experiences.
- Aim to present a thoughtful, heartfelt reflection on your experiences, *not* a sales pitch. Do NOT blandly write, “X experience allowed me to develop Y attribute.” Rather, share anecdotes and examples that convey those traits implicitly.
- Convey how you have *changed* and *grown* as a result of your experiences over time.
- If you have been involved in research, be sure to discuss the *intellectually satisfying* aspects of doing research. The schools do not care which lab techniques you learned. They are interested in your intellectual engagement.
- If you mention another person who has inspired you, do so in a concise manner. Refer to their example only as a way to lead into a discussion about subsequent experiences you’ve had.
- When describing your interactions with patients, focus on *the patient’s experience*, not on the gratitude they may have expressed or the interest they may have taken in your career path. In other words, seek to understand, not to be understood.
- The personal statement should *not* be a chronological narrative of the activities you will be listing in your application. That’s what the *Experiences* section of the application is for.
- Do not assume that a reader will have read the *Experiences* section of your application first. They may read the Personal Statement first. Thus, when referring to any activity, put it into context for the reader. That said, do not use up valuable space in the personal statement by reiterating detailed information that you will provide in the *Experiences* section.
- Proofread carefully. An essay full of spelling errors and grammatical mistakes is unprofessional and indicates a lack of attention to detail.

TOPICS TO AVOID

Each of the following topics tends to be quite common in personal statements in applications for the health professions. We recommend avoiding these topics so that your essay does not end up sounding similar to many other essays:

- Beginning the essay with a statement indicating that you have/haven’t always known that you want to be a healthcare professional.
- Describing the “eye-opening” or chaotic experience of an international medical relief trip or in an Emergency Department. (The chaos of a setting is not the point. The point is what you learned from the experience about authentic, compassionate service to others.)
- Referring to Paul Farmer or to a TV show

LOGISTICAL TIPS

- The professional school application will not allow for any special formatting. Thus, prepare your essay in a word processing app using “Clear Formatting.” After copying-and-pasting into your application, double-check that the formatting is still okay.
- You will not be able to use indents, so use standard block paragraph formatting. (That is, hit “enter” an extra time after each paragraph, leaving blank line between paragraphs.) To save characters, use only one space between sentences.

CHARACTER LIMITS

AACOMAS: 5300 characters
AAPMAS: 4500 characters
AADSAS: 4500 characters
AMCAS: 5300 characters

CASPA: 5000 characters
OPTOMCAS: 4500 characters
OTCAS: No character limit
PharmCAS: 4500 characters

PTCAS: 4500 characters (prompt changes annually)
TMDAS: 5000 characters
VMCAS: Three essay prompts, 1000 characters each

Example 1

Stepping into the room, I paused for a moment and closed my eyes. All I could hear was the rhythmic hissing of the ventilators synchronistically pumping lifesaving breaths into my patients. Taking a deep breath, I braced myself for the sight of my two sickest patients lying prone in their beds. I was an emergency response nurse working in a makeshift ICU in the Bronx, New York, helping with the COVID-19 pandemic in the spring of 2020. I started shifts by swiftly moving between rooms to hang essential drips before they ran dry. In between racing to codes and discussing care plans, I would steal quick moments to comfort my patients and genuinely promise to take good care of them. One year prior, I was holding the hand of an elderly woman as she took her last breaths. I had already gathered the medications needed to make her more comfortable but was waiting for the orders to give them. The attending physician quickly came to the bedside; I administered the medications, and as we talked very soothingly to our patient, her breathing slowed, and her eyes became less fearful. As her world melted away, my only desire was to ease this woman's pain and suffering. I am fortunate to have had the privilege to work as an ICU nurse in many settings and with diverse populations; however, I have increasingly felt conflicted in my career. I relish taking an active part in the healing of others but have come to realize that my current knowledge and abilities are lacking for the type of healthcare provider I wish to be. I am confident and sincere in my decision to alter my career path and dedicate my life to serving others through the practice of medicine.

I was raised in a small rural town in southern Ohio, the eldest of four. I was homeschooled for a period of my early education and was accountable for getting my coursework, piano practice, and chores finished punctually; this taught me at a young age to carefully manage my time. As the oldest, it felt natural to protect, nurture, and support my siblings whether it was wrapping a sprained ankle or standing up for them when needed. I also felt this same responsibility to speak up to injustices that I witnessed extending beyond family. On several occasions, I found myself across from my high school administrators discussing issues including bullying and teen depression/suicide. I also felt the influence of a special neighbor, Bill, a Korean War veteran, who would visit my family often and challenge me with thought-provoking questions. He passionately valued education and fervently encouraged me to always continue learning and seek answers that broadened my worldview. Growing up in this intellectually stimulating environment nurtured my sense of curiosity, taught me to be unafraid to challenge the status quo, and to be an independent thinker, undeniably important foundations for my growth. These qualities, along with my inclination to advocate and care for others, led me to a path in healthcare.

My personal journey continued in my nursing career with experiences that gave me further perspective and insight. Specifically, during a particularly long work stretch, I had two immensely sick and complicated patients requiring meticulous care; completing the necessary tasks simultaneously was challenging physically, mentally, and emotionally. I spent three days at the bedside with my team continuously monitoring and discussing the complex problems arising. We worked in careful unison, always generating new ideas to treat these critically ill patients holistically and thoroughly. Nevertheless, I would finish my shift feeling like I was lacking the

knowledge needed to piece the details together. My nursing experience in the critical care setting has initiated much introspection and piqued an intense feeling of curiosity and desire for a deeper understanding of science and medicine; this has fueled my decision to become a physician.

Admittedly, my time as a nurse has taught me as much about myself as it has taught me about others. All that I have learned, experienced, and witnessed to this point has transformed me in unimaginable ways and is intertwined to create the tapestry of my life. More importantly, these experiences have directed my decision to further my medical education. When I was younger, I thought that I needed to do something profound to make a difference, but now I realize it is the ordinary events that are life-changing and profound. It is listening to an elderly man tell me his life story after the news of a terminal illness or tenderly putting lotion and socks on an intubated patient's dry feet. It is advocating for someone who cannot speak for themselves and caring for them like they are family. It is choosing to become a physician who is compassionate, intuitive, and in control of situations. I have been inspired by witnessing these qualities in many of my healthcare teammates and am passionate about expanding my knowledge in medicine to continue the healing and well-being of others. As a physician, I unequivocally intend to place the qualities of kindness, acceptance, open-mindedness, curiosity, perseverance, diligence, and advocacy at the forefront of my daily practice. I have found my purpose, and I am wholeheartedly committed to share it with humankind.

Example 2

My hands shook as I pulled out my interview questions. Brian, a man with a history of violent behavior sat across from me. He had agreed to speak to me as part of a sociological research study examining factors leading men to violence. This was the first time anyone asked Brian about his experiences, and over the course of three hours, he slowly opened up, tearfully relating stories of his abusive father and how he himself had turned to violence to cope with the trauma of his childhood. Hearing the stories of the men I interviewed taught me that every person is impacted by a unique combination of circumstances that influence their behavior, health, and access to resources. Though research allowed me the opportunity to learn about challenges people face, I realized that I wanted a more direct role in helping others confront these issues, which is why I want to become a physician assistant. With their advanced training and extensive patient contact, PAs are uniquely positioned to not only understand, but treat their patients. As a PA, I plan to use my background in sociological research as a lens to approach healthcare, providing patients with the compassionate care they deserve, serving their healthcare needs and offering a safe space to tell their story.

When I was 18, I underwent a spinal fusion surgery for scoliosis. Ryan was the PA that diagnosed my condition, assisted in the surgery, and guided me through a long recovery, all the while addressing my questions, worries, and pain. Ten years later, I have had multiple opportunities to observe Ryan's work in the orthopedics program at Children's Hospital in Denver. I shadowed Ryan as he helped perform the same kind of spinal fusion surgery that I had, but this time for Jessie, a 16-year-old with a similar scoliosis diagnosis to my own. In the friendly atmosphere of the operating room, I was struck by the synchrony with which Ryan and the surgeon worked, their confident movements as they drilled spaces for each pedicle screw revealed the trust built over years of working together. After securing the rods, the surgeon thanked everyone and left. It was Ryan, now in charge of the OR, who stayed to suture the incision, dress the wound, and assist the nurses in transferring Jessie to her room where he squeezed her hand, and whispered, "Hey lady, you did great! I'll check on you later." Ryan's ability to balance his roles as an integral member of the team as well as an independent provider with the medical expertise to care for his patients demonstrated to me the unique position that PAs occupy, allowing them to address both the technical and human sides of patient care.

By engaging with his patients, Ryan showed me the power that PAs have to foster a culture of compassion for all patients. In my own clinical experiences, I have also worked to create a safe space for patients to share their perspectives and make their own healthcare decisions. While working as a bilingual clinic assistant at Boulder Valley Women's Health, a clinic primarily serving underrepresented communities, I often translated visits for Spanish-speaking patients like Laura, who presented one day with a lump in her breast. As I relayed the news to Laura that she needed further testing, she turned to me and said, "What if it's cancer? I have children and am undocumented. *Tengo miedo*" (I am scared). I listened to her and provided information on financial resources to help her pay for her medical bills but wished I could do more. Another day at the clinic, I met Tara while caring for post-abortion procedure patients. Tara entered the recovery room visibly shaken. As I handed her a cup of tea after taking her vitals and removing her IV, I asked Tara if she wanted to talk. She burst into tears and told me her story of how she had just been accepted into a PhD program after years of rigorous applications, several rejections, and burgeoning student debt. Her elation was crushed with the discovery of an unplanned pregnancy. Tara's mood improved as she had space to express her feelings, and she

confided in me that the team at the clinic made her feel safe and comfortable through respecting the decision she made about her body and her health.

I think back to my role on the sociological research team and am reminded of the lesson I learned from interviewing men like Brian that everyone deserves a safe space to tell their story no matter their life circumstances. Later hearing the stories of patients like Laura and Tara further reinforced my belief in the importance of compassionate healthcare and respect for patients' autonomy. As a PA, the ability to regularly engage with patients would give me the chance to create the same compassionate culture that we had at Women's Health and that I experienced with Ryan, while the sophisticated medical training would arm me with the skillset that I need to properly understand, inform, and treat patients, empowering them to make their own healthcare decisions.



TIPS FOR WRITING APPLICATION EXPERIENCE DESCRIPTIONS

WHICH EXPERIENCES TO INCLUDE ON YOUR APPLICATION?

You are given a limited number of entries. As you think about your past experiences, think broadly about their relevance to your personal development. Select an assortment of meaningful experiences that particularly informed/fostered your:

- Understanding of the career you seek to enter:
 - Particularly important: Focus on the *patients*. You may want to mention insights you have gained into the work of clinicians, but only in a manner that is secondary to the insights you have gained about the experiences of patients.
 - Convey awareness of the social factors influencing your intended profession
- Passion for direct service to others
- Style of interpersonal communication
- Understanding of people of different cultural and/or socioeconomic backgrounds
- Understanding of human behavior
- Approach to structured intellectual inquiry (i.e. research experience in any field)
- Capacity for critical thinking and problem-solving where the answer is not clear
- Resilience in the face of challenges, ability to learn from experience, capacity for self-reflection

HOW TO CREATE COMPELLING EXPERIENCE DESCRIPTIONS

LOGISTICAL CONSIDERATIONS

- Each experience description should be written as a narrative summary, using complete sentences.
- Possible exception (mainly for AMCAS): For Shadowing, Honors and Awards, or Publications, you may use a bulleted list.
- Maximum length (varies by application service): typically 600-700 characters, including spaces.

TOPICS TO ADDRESS IN EACH EXPERIENCE DESCRIPTION

- Convey your level of involvement in the activity
 - Provide a thoughtful, heartfelt description of the way in which the experience impacted you:
 - The insights you gained from the experience
 - How the experience shaped your motivations
 - How the experience shaped your personal development
- ... Do NOT provide a list of technical skills that you have mastered

Shadowing

Shadowing is the observation of a health care provider while that individual cares for and treats patients.

- Reflect upon the insights you gained from observing others:
 - What you have learned about the needs of patients and effective, compassionate approaches to patient care?
 - What you have learned about the nature of the work itself?
- Logistical considerations:
 - In AMCAS: Group all short-term shadowing experiences into a single Experiences entry. You can provide bulleted list of the names and specialties of the people you shadowed at the beginning of your Experience Description.
 - In all other applications: Enter each shadowing experience as a separate entry

Direct Patient Interaction

Direct patient interaction is defined as being in a position to offer comfort and moral support to conscious patients (and, for pre-vet students, human clients) in a health care environment. It may include attending to patients' health maintenance, progression, or end of life needs. It is important that you convey your comfort level with patients who are sick or injured.

- Describe your level of involvement in direct patient interaction
- Where possible, include anecdotes of meaningful interactions you have had with patients in clinical settings
- Convey how your patient interaction experiences have:
 - Reinforced your interest in entering a career that focuses on patient care
 - Given you first-hand insight into effective approaches to caring for patients and their loved ones

Research

Research is defined as involvement in a scholarly or scientific hypothesis investigation that is supervised by an individual with verifiable research credentials. Research may be in any discipline and performed at any site, but it must involve the testing of a hypothesis.

- State your research topic or specific question
- Convey your level of intellectual involvement. Note if you have:
 - Been engaged in reading and discussing relevant primary literature
 - Participated in laboratory meetings on a regular basis
 - Contributed to experimental design
 - Engaged in troubleshooting when the unexpected occurs
 - Written a successful grant proposal
 - Written a research thesis and/or manuscript for publication in a peer-reviewed journal
 - Presented at a conference
- Provide a reflection statement: Why have you have found it intellectually rewarding to engage in this work?
- If results are available, summarize them and briefly indicate why they are interesting/meaningful

Non-clinical employment and volunteer work

- Convey your level of involvement/responsibility
- Where applicable, share how this experience reinforced your interest in a career focused on service to others and/or intellectual problem-solving
- Reflect upon the personal skills fostered by the experience
- Where applicable, explain how certain experiences have given you insight into effective approaches to:
 - Being of service to people in marginalized populations
 - Effective approaches to collaboration
 - Effective approaches to leadership

Honors, Awards, Scholarships, Academic Enrichment Programs

- Only include examples that are a really big deal
- In your description, identify the selection criteria

Hobbies

- Create a single "Hobbies" entry, identifying your favorite hobbies. This entry shows that you have other passions, conveys how you relieve stress, and (potentially) allows you to connect with interviewers due to a shared hobby.

FREQUENTLY ASKED QUESTIONS FOR THE EXPERIENCES SECTION

1. What if I'm not sure which category is most appropriate for a given activity?

Choose the one that you feel fits best. For example, if you worked in a research lab, but it was purely a dishwashing job (with no involvement in the research itself), then list this position as "Other Paid Employment," not "Research." Likewise, if you completed a summer engineering internship in a Research and Development group, but were not conducting hypothesis-driven research, then this would also fall under the "Other Paid Employment" category.

2. What if different aspects of the same experience fit in different categories?

- Option 1: Give each aspect of the activity its own entry (with inclusive dates and hours per week for just that aspect of your involvement) under the appropriate category.
 - This approach highlights each aspect of the experience, but uses up two of your limited allotment of entries.
- Option 2: List it just once, under the category that represents the activity that was most dominant. Use the Experience Description to explain the two aspects of the experience.
 - Example: If you worked full-time in a medical clinic where roughly 60% of your time was spent as a medical assistant and 40% of your time was spent as a receptionist at the front desk, you could list the experience as "Medical Assistant and Receptionist" and use the Experience Description to describe each set of duties.

3. How should I enter the contact information for the supervisors of my activities?

Indicate a person who can be contacted by the professional schools and would be able to verify that the experience occurred. For example, you may enter your supervisor or the individual in charge of a particular program. If the experience was a student-organized group and there is no official supervisor, you may list a staff member in the Student Affairs Office who can verify your experience.

4. Why am I asked to provide inclusive dates, hours per week, and total hours?

These entries give application reviewers a sense of how much time you spent on each activity. If you spent a lot of time, your interviewers will expect you to have more in-depth knowledge of the activity than if you spent just a little time on it.

AMCAS® Application Course Classification Guide

The following guide provides examples of how courses are often categorized. Please select course classifications based on the primary content of the course.

In the case of interdisciplinary courses, where two or more subject matters are combined into one course, refer to the description of the course on your school's website or consult with your Pre-health Advisor to choose the most appropriate course classification.

Biology (BIOL)

- Anatomy
- Biology
- Biophysics
- Biotechnology
- Botany
- Cell Biology
- Ecology
- Entomology
- Genetics
- Histology
- Immunology
- Microbiology
- Molecular Biology
- Neuroscience
- Physiology
- Zoology

Chemistry (CHEM)

- Biochemistry
- Chemistry
- Physical Chemistry
- Thermodynamics

Physics (PHYS)

- Astronomy
- Physics

Mathematics (MATH)

- Applied Mathematics
- Biostatistics
- Mathematics
- Statistics



Biology-Chemistry-
Physics-Math (BCPM)
Courses

Behavioral & Social Sciences (BESS)

- Anthropology
- Economics
- Family Studies
- Psychology
- Sociology

Business (BUSI)

- Accounting
- Finance
- Human Resources Studies
- Management
- Marketing
- Organizational Studies

Communications (COMM)

- Journalism
- Media Production & Studies
- TV, Video & Audio

Computer Science & Technology (COMP)

- Computer Science
- Computer Engineering
- Information Systems
- Telecommunications

Education (EDUC)

- Counseling & Personnel Services
- Curriculum & Instruction
- Educational Administration
- Educational Policy
- Health Education
- Human Development
- Physical Education (Except for sports courses.)
- Special Education

Engineering (ENGI)

- Aerospace Engineering
- Biomedical Engineering
- Chemical Engineering
- Civil Engineering
- Electrical Engineering
- Environmental Engineering
- Nuclear Engineering

English Language & Literature (ENGL)

- Composition & Rhetoric
- Creative Writing
- Literature

Fine Arts (ARTS)

- Art
- Art History
- Dance
- Fine Arts
- Music
- Photography
- Theatre

Foreign Languages, Linguistics, & Literature (FLAN)

- American Sign Language
- Comparative Literature
- Foreign Language(s) & Literature
- Linguistics

Government, Political Science, & Law (GOVT)

- Criminology & Criminal Justice
- Government
- International Relations & Studies
- Law/Legal Studies
- Political Science
- Public Affairs & Policy
- Urban Policy & Planning

Health Sciences (HEAL)

- Allied Health
- Chiropractic
- Dentistry
- Hearing & Speech Studies
- Hospital Administration
- Kinesiology
- Nursing
- Nutrition
- Occupational Therapy
- Optometry
- Osteopathy
- Physical Therapy
- Physician Assistant

- Public Health
- Pharmacology & Pharmacy
- Sports Medicine
- Veterinary Medicine

History (HIST)

- History

Natural & Physical Sciences (NPSC)

- Agriculture
- Animal & Avian Sciences
- Environmental Science & Policy
- Forestry
- Geography
- Geology
- Horticulture
- Landscape Architecture
- Meteorology
- Natural Resources
- Oceanography

Other (OTHR)

(All courses that do not fit appropriately in another classification)

- Architecture
- Library Science
- Military Science
- Sports (tennis, golf, aerobics, etc.)

Philosophy & Religion (PHIL)

- Ethics
- Logic
- Philosophy
- Religion
- Theology

Special Studies (SSTU)

- Afro-American Studies
- American Studies
- Gender Studies