MEDICAL, DENTAL, AND VETERINARY SCHOOL

APPLICATION YEAR GUIDELINES

FOR GS POSTBACCALAUREATE
AND UNDERGRADUATE STUDENTS
OF THE ENTERING CLASS OF 2021
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Introduction

This handbook is intended to guide GS undergraduate and Postbaccalaureate Premedical students through the professional school 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. As a member of the Premedical/Prehealth Committee, your advisor also provides support for your candidacy as a professional school applicant.

There are many similarities between the application processes to medical, dentistry, 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 intently interested in your progress toward your goals, and committed to helping you attain them. Please keep in touch.

You are welcome to read this handbook at any time—indeed, we encourage you to read it early in your studies so that you have an idea of what’s to come. Reading it becomes timely, however, once you have completed at least the first semester of organic chemistry and Contemporary Biology and have submitted the on-line internal application to the Premedical Office.

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 independent from the Premedical Committee and its requirements will find useful information here.

Application Lifecycle

You will notice that this is a lengthy document. This is because the application process is complex and long, and there are many details to explain. But an abundance of details can be overwhelming, if you don’t have a sense of how they fit together. 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, occasionally-overlapping phases:

1) Application to the Premedical Committee (deadlines in January and late June of the Orgo/Bio Year)
2) MCAT (Medical College Admission Test) (late spring/early summer)
3) Choosing schools (winter and spring)
4) AMCAS (primary or common) application (plan to submit this in June)
5) 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)

As you can see, these components are listed in roughly chronological order. While there is a rationale behind the time frames indicated here, please bear in mind that there is some room for variation.
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 (www.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, but these are in a traditional book format.

Financial Considerations
Budget: The thing that the above phases and components (most of them) have in common is that they involve expenses. You need to plan ahead so that you can cover them. Typical application year expenses include:

- Maintenance of Status fee (GS postbac only): $160 per semester (see below, p. 23)
- Primary application fees (last year the fees were $170 for the first school and $40 for each additional school)¹
- Secondary application fees ($75-120 per each additional school)
- Transcript fees (variable)
- MCAT ($315), including (where applicable, additional charges for late registration, changes to registration, etc.
- Medical School Admissions Requirements a.k.a. “MSAR” ($28)
- MCAT prep materials
- Travel and lodging expenses for interviews
- Days off work perhaps without pay
- New clothing and/or dry cleaning expenses
- Acceptance deposits²
- Moving expenses

Hypothetical total application cost: $4658 (might be lower; could be higher).

Fee assistance: The AAMC sponsors a fee-assistance program which greatly alleviates certain application costs for eligible applicants. For example, the cost of registering for the MCAT is reduced from $320 to $130, and AMCAS application fees for up to twenty schools are waived (a savings of ~$930). For more information about the AAMC fee assistance program, see: https://students-residents.aamc.org/applying-medical-school/applying-medical-school-process/fee-assistance-program/.

Creditworthiness: Beyond the significant, but superficial, expenses enumerated above, it is extremely important to have your finances in order so that you are regarded as “creditworthy.” As explained in the Columbia University Student Financial Planning Financial Aid Handbook for Medical, Dental, and PG Students, “Good credit often determines who can borrow and who cannot…. [I]f you have a poor credit rating; it is imperative that you rectify past problems before matriculation.” This handbook goes on to explain the implications of good and bad credit:

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 $930. 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.
Good credit requires a continuous pattern of prompt payments, no current payment delinquencies, and no negative items such as collections, repossessions or foreclosures. A good credit history means that you are “creditworthy.” Some students have not yet established a credit history, and, for educational loans, this is equal to good credit. It is known as “credit-ready.” Future health service professionals are considered to be very good credit risks.

Bad credit, on the other hand, reflects delinquent or slow payments, current delinquencies or other negative items. The credit criteria used to review/approve student loans can include the following: (1) absence of negative credit; (2) no bankruptcies, foreclosures, repossessions, charge-offs, or open judgments; (3) no prior educational loan defaults unless paid in full or making satisfactory progress in repayment; and (4) absence of excessive past due accounts, i.e., no 30-, 60-, or 90-day delinquencies on consumer loans or revolving charge accounts within the past two years.

Since lenders are required to report student loans to at least one credit bureau, your credit could be bad because of failure to keep deferments current or to make required payments. Bad credit will not only deny you access to loans for education, you will not be able to finance a car, a home, a practice, or much of anything else. Your credit rating must be protected at all costs, and that means making wise decisions and knowing where problems might arise.

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 (https://www.aamc.org/services/first/).

Social Media Presence
Establishing your creditworthiness is only one of the tasks you, the prospective applicant, must undertake to put your house in order before applying. Another is to 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. One director of admissions recently informed an audience of postbacs that before she extends an interview invitation to an applicant, she routinely conducts a web search. How pervasive this practice is, we do not know, but it is probably becoming increasingly common, and at the very least, offices of admissions conduct such searches on an ad hoc basis. You have put a lot of hard work into making yourself as desirable an applicant as you possibly can. Don’t let the internet undermine this.

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 submitted in January (essays, resume, headshot, draft of personal statement and of your Work & Activities entries), and all the additional documents due by June 30 (e.g., your common application, letters of recommendation, and verification of your work in health care settings). It also includes an interview with a member of the Premedical Committee sometime between February and June. The essays—perhaps the most difficult and time-consuming part of the internal application—and the committee interview 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). It takes time to formulate these things in the way that most sharply delineates you as an individual, but the payoff for the effort can be enormous.

**MCAT**

The MCAT is the Medical College Admissions Test. The test is largely in multiple-choice format and is offered exclusively on computer. 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.

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; however, in recent years, several successful exam-takers devoted themselves to a month of full-time study in the spring after their final exams. There is no prescribed way to prepare, and it is left to each student to determine what will best serve his or her interests. While many students enroll in test prep courses, there are still quite a few who find that studying on their own is quite effective. Perhaps a still more effective approach is to work with a study partner. Each year in the fall, the Postbac Program hosts a panel of application-year GS premeds who describe their experiences using one or another method of MCAT preparation. Attending this event is an excellent way to learn about your options.

The MCAT is offered thirty times in 2020. While taking the MCAT in the spring may seem like a hardship, there are significant advantages to doing so; we therefore encourage students who plan to submit applications in the summer (for fall admission the following year) to take the MCAT in April, May, or June. These dates are advantageous for at least four reasons:

1) *Low MCAT 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. Students who receive an overall score below 508 should contact their advisors immediately to discuss their situations. Students who are taking the MCAT for the first time after June at the start of their application year should talk this decision over with their advisors to find out how this may put their applications at a disadvantage.

2) *Receipt of MCAT score before submission of AMCAS*: You will have scores from an April or May test by the end of June, if not earlier, by which point your AMCAS application should be submitted. Please note: June MCAT scores won’t be reported until July. Because it is in an applicant’s interest to submit AMCAS in June, this would mean submitting your application without knowing your score.

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*: Another reason to take the MCAT by the end of June is that, once you have submitted AMCAS, you will begin to receive secondary applications. It is advisable to complete and submit secondary applications within two to three weeks of receiving them. This can become difficult to accomplish, if you are also preparing for an MCAT exam in July or August. If you do decide to take the MCAT after June, you will have to find a way to pay Paul without robbing Peter.
Of course, there’s no magic to a calendar date and one should not take any exam unprepared. Our advice about 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.

**MCAT Preparation and Program Planning**

To free up time in the spring semester to prepare for the MCAT, some premeds exercise the option of postponing either organic chemistry lab or (less frequently) biology lab until the summer. Doing so will not make you ineligible for committee support. Be advised, however, that because organic chemistry lab is a two-semester course during the usual academic year, any decisions to postpone this lab to the summer, when it is offered as a six-week course, would be made preferably before the fall semester begins. You cannot begin this lab in the spring. Further, if you decide to postpone the lab until after the academic year, it must be completed at Columbia by the end of the summer and you must assume all responsibility for changes in circumstance (e.g., housing) after the spring semester. Finally, space in the summer labs is limited and not guaranteed. We therefore urge postbacs who wish to take summer labs to register for them during the on-line summer registration period in the spring semester.

Organic chemistry lab is offered only in the second summer session. If you plan to take the MCAT during the summer, consider whether you might be better off completing all required courses by the end of the spring semester so that you can study unencumbered. Similarly, if you take the MCAT in the spring and postpone a lab to the summer, consider what it would mean, if you need to retake the MCAT in the summer.

Before deciding to postpone a lab or other course until the summer, students should consider that this may mean submitting the common application without a record of the final grade. This is because the Premedical Office encourages you to submit your common application by the end of June. Grades from the first summer session won’t be available until early July; those for the second summer session won’t be available before mid-August. The absence of this grade will not invalidate your application, but you must decide whether your record needs the lift of a strong lab grade.

**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 [http://www.ada.org/en/education-careers/dental-admission-test](http://www.ada.org/en/education-careers/dental-admission-test).

**GRE:** Most schools of veterinary medicine require applicants to take the GRE (Graduate Record Examination) general exam (an exception may be made 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 [http://www.ets.org/gre/revised_general/about](http://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” 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 medical schools (the number of schools on a predent's or prevet's list will probably be smaller).

We encourage all students to begin learning about medical schools from the time they matriculate at Columbia and compiling lists of prospective schools to which to apply; however, until you have your spring orgo/bio grades (and, ideally, also your MCAT scores), it will be difficult to pare your list down with confidence. Thus, while you are always welcome to “talk schools” with your advisor, you may want to plan a conversation with him or her in May or June as you near the time to submit your common application.

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/.

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 Premedical Association’s Medical School Fair. At this annual event, admissions officers representing more than forty 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.

**Preventer Students**

Students can find a list of schools of veterinary medicine at: http://aavmc.org/Member-Institutions.aspx. Summaries of prerequisites for individual schools may be found on the schools’ websites. Prevets should also consider purchasing the Veterinary Medical School Admissions Requirements (VMSAR) to have prerequisite information all in one place. 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: http://www.adea.org/dental_education_pathways/aadsas/Pages/PDS.aspx. The American Dental Education Association’s Official Guide to Dental Schools is available for purchase at: http://www.adea.org/dental_education_pathways/educational_resources/Pages/ADEAOfficialGuidetoDentalSchools.aspx

**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, among other factors. 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. Increasingly schools have introduced clinical training as early as the first year. Other special curricular features include 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, much as it is at most undergraduate institutions; 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. Are you more comfortable with one approach than another?

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, 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. Do not apply to any school you are not prepared to attend.

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 instruct in small group settings. Investigate.

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. These generalizations may vary 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 this 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 more 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.

13) **Underrepresented in medicine.** Most schools have an Office of Multicultural Affairs, which provides guidance to applicants 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 provide 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.

What we said above regarding a school’s location applies more generally: *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. Private schools may accept them; however, some 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. 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?” Ultimately, the experiences you choose of your own free will, interests, and self-motivation will help to distinguish you from every other applicant with similar grades and scores. Medical schools are looking for bright, kind, self-directed, accomplished, and well-related individuals of good character, that is, persons who are not cast in a common mold.

### 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 (https://www.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. It has been our experience that an application submitted by the end of June is a timely one; however, in recent years, there is evidence showing it can be advantageous to submit AMCAS as early in the month as possible. Of course, there is nothing to be gained by submitting an application that has not been carefully prepared and edited, and it may be worthwhile to spend an extra day or two to ensure that you get it right. The completed application generally runs to twelve pages and includes:

- 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

(This is not an exhaustive list of the contents.)

Completion of the AMCAS application is a time-consuming, painstaking task. It should not to be left to the last moment. The Work & Activities entries and the Personal Statement draft you were required to submit with your internal application in January will 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.³ 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 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: http://registrar.columbia.edu/content/transcripts. On the “Select Documents” page, be sure to choose the “AMCAS Transcript” option. You can also submit a signed hard copy of the Transcript Matching Form to the Registrar’s Office in 205 Kent Hall. 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.

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³ Unfortunately, the Premedical Office is unable to comply with requests for copies of the transcripts you submitted with your application to the Postbac Program.
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 average on your transcripts.

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. 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 those seven 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 for two reasons: (1) 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. (2) Your essays are important sources for the writing of your committee letter; however, they become much less valuable, if you have depleted them in the writing of your personal statement.

If this advice leaves you in a quandary about what to write, we are committed to offering you some assistance: During the spring semester, the Postbac Program’s Writing Consultant will offer a personal statement writing workshop and provide some tip sheets to which you can refer as you develop your personal statement. 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 available to discuss your personal statement with you. Indeed, this is why you were asked to submit a revision of your personal statement one week before your portfolio review.

AMCAS Submission
Once you have submitted your application to AMCAS, you must submit a copy of the application 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. We recommend that you submit your common application to AMCAS by June 30. Submitting it to the Premedical Office by that date (per the instructions above) guarantees submission of your committee letter by one of the “early assurance dates” (concerning which, see below). This will help to insure that you are an early applicant. (Please note: if you have financial holds, it may delay the sending of your committee letter.) If you plan to take the MCAT after June, it still may be in your interest to file your AMCAS application early; however, you should discuss this with your advisor.

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4 Character limits for other common applications are: AACOMAS = 4500; AADSAS = 4500, and VMCAS = 5000.
5 Redundancy is inevitable, even necessary. After all, the applicant and the Premedical Committee are writing about the same person, albeit from different perspectives. We are thinking in particular of illustrations (vignettes, anecdotes) that enliven, exemplify, and authenticate traits and substantiate claims.
Once you have submitted your application, it may take four to six weeks for AMCAS to verify its contents. In particular, the academic record in your application is checked against your actual post-secondary transcripts. This is done by hand. 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 and some 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. Be advised that 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; we will not tell you which individual letters we are attaching to your committee letter, if you have waived this right (see Universal Waiver Form in the internal application). 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, assuming you are applying with committee support. Please enter your advisor’s name as the “Primary Author/Contact.” More information about AMCAS’s letter program is available at: [https://students-residents.aamc.org/applying-medical-school/faq/amcas-faq/](https://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 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.

**Deleting Schools after AMCAS Submission**

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. These do not participate in the AMCAS Letters of Evaluation Service because they do not belong to the AAMC (off-shore schools), or because they use their own common application service (Texas state university medical, schools and AACOM osteopathic medical schools). 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)
The Tel Aviv University Sackler School of Medicine New York State/American Program
The Medical School for International Health of Ben-Gurion University of the Negev
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
The TEAMS Program at The Technion
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 Instruction Manual, a lengthy detailed PDF available on the AMCAS website. It will contain answers to many of your questions (e.g., does psychology count as a science?) AMCAS also provides a help phone line if you need to speak to someone (202-828-0600). You are always welcome to ask your premed advisor, although he or she may be reluctant to speak in the name of AMCAS.

AMCAS Updates
If past experience is any guide, there may be small, but important changes to the AMCAS application which may not be announced until May or June. We will make every effort to inform you when we learn more about any changes in the format of AMCAS for the coming application cycle.

Other Common Application Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>AACOMAS (osteopathic medicine)</td>
<td>aacom.org</td>
</tr>
<tr>
<td>AADSAS (dental)</td>
<td>adea.org</td>
</tr>
<tr>
<td>TMDSAS (Texas medical, dental, and veterinary schools)</td>
<td>tmdsas.com</td>
</tr>
<tr>
<td>VMCAS (veterinary)</td>
<td>aavmc.org</td>
</tr>
</tbody>
</table>

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, 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 (that is, soon after your AMCAS application has been verified). They require an additional fee and often 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 will 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 ten days or two or three weeks. Others simply have a single fixed deadline date (e.g., October 15 or January 1). Be sure you know how soon you must return the completed application. Further: while you may be extended the luxury of a distant deadline (e.g., November 1), do not indulge yourself. Make a point of returning such applications within two to three weeks. The timely turnaround of these applications will communicate the seriousness of your interest even at a school that conducts admissions on a non-rolling basis.

- In writing essays for your secondary applications, try to go beyond your personal statement 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. Choose accomplishments other than those you discussed in your personal statement or AMCAS application, if feasible.

- When asked to name your referees, always answer “General Studies Premedical Committee dossier” in order to avoid any confusion that might delay consideration of your application. If you have waived your right of access to your committee letter, you won’t know exactly which individual recommendation letters the committee has attached to it; you should not, therefore, provide the names of individual recommenders. (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., off-shore schools generally), 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 have introduced CASPer, an online situational judgement test, into the admissions process. Usually, applicants are required to take CASPer (an acronym for Computer-Based Assessment for Sampling Personal Characteristics) before the interview, and at least some schools use the test results to determine whether or not to invite the applicant for an interview. It is not a test
of content knowledge, but of one’s aptitude to choose a course of action in or otherwise respond to hypothetical, but plausible real-world scenarios. Because the exam is designed to test for such attributes as self-awareness, ethics, empathy, problem-solving, and professionalism, it doesn’t lend itself to study. However, it is a good idea to become familiar with the purpose and the format of the test. Please see https://takecasper.com/ for more information about the CASPer.

**Committee Letter & Recommendation Letters**

Just as the words of your personal statement help to distinguish you from the masses of other applicants with similarly strong grades, so, too, do the words of third parties. The latter presumably provide an objective assessment especially insofar as the authors have a basis of comparison with other students they have taught or volunteers they have supervised. Individual letters of recommendation assess the performance and character of an applicant generally 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, 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 https://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). If you waived your right of access to your recommendations and committee letter, you will not know precisely which letters the Committee chose to attach (if your file contains more than four letters); however, generally the attachments will include at least two letters from Columbia’s science faculty. It also strives for variety while helping to put your best foot forward. Secondary applications will sometimes ask you to list the names of your referees. In almost every case, it suffices to respond by writing “GS Premedical Committee Dossier.”

To lessen the pressure of the weeks leading up to the June 30 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.

By September 1, barring any unforeseen or special circumstances, the Premedical Committee will write letters of committee support for those students who have met the eligibility requirements, including completion of the academic course work and clinical health care experience, have completed their portfolio review, have submitted all necessary and required materials to the Postbac Office by June 30 and have taken the MCAT before the end of July (see timeline for more details about the timing of these submissions). Furthermore, those students who have satisfied these requirements, but have also taken the MCAT by June 21 will have their committee letters sent by August 15. AMCAS automatically notifies applicants when their committee letter packets are received. Please note: If you have financial holds, it may delay the transmission of your committee letter packet.

**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 predents. 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 his or her letter directly to VMCAS. The applicant must insure that all necessary individual letters of recommendation are submitted.

The Premedical Committee is aware that these stipulations are complicated; advisors will work closely with prevet applicants to ensure a smooth application process. We are here to assist you.

Other Special Letters

One of the virtues of the committee letter is that, on the whole, it trumps 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 provide a letter of good standing, if the Columbia committee letter does not make this statement about their undergraduate status. (N.B. We can attest to a postbac’s good standing as an undergraduate only if we have received from the school an explicit statement to this effect.)

Quinnipiac requires a character reference letter. Since most medical schools do not want such letters, it may be a good idea to assign such a letter its own letter ID number so that it can be uploaded just for Quinnipiac or any other school that requires it.

Washington University requires a “Dean’s Certification” and will provide a form for this purpose. Please give this form to your advisor to complete along with a stamped envelope preaddressed to the Wash U Admissions Office.

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

Your schedule during the coming year should be flexible enough to allow you to go on interviews. Once a school has received your application, the admissions committee will decide whether to invite you for an interview. Schools vary here. Some may offer interviews on the basis of your AMCAS application, MCAT, and secondary alone (though eventually they will want your committee letter and recommendations). More typically, though, they will require a complete file. You should accept every interview offered to you and embrace it as an opportunity: It is your chance to learn more about the school and to positively influence its view of you. Even interviews at schools in which you have limited interest can serve as a learning tool. 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, if you provide the school with sufficient (i.e., 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. An eleventh hour cancellation is hardly different in the eyes of the medical school from a no-show. (Of course, if you are undergoing a sudden serious illness or personal emergency, the medical school will try to be understanding of a last minute cancellation.)

How many interviews will you get? It is impossible to predict; however, 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. If two or more schools in the same remote area offer you interviews, it is generally acceptable to try 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 consider the implications of doing so carefully. Formerly, if an applicant notified schools, upon submission of her secondaries, of plans to be abroad for an extended period, the schools would try to schedule interviews for that applicant within the window of time created by a planned visit back to the States. While many schools may still be willing to accommodate applicants in these circumstances, we are concerned that it is becoming impractical for them to do so as the number of applicants going abroad during the application year has swelled.

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 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.

Though it is by no means standard, the Multiple Mini Interview (MMI) is an approach to interviewing that is becoming increasingly common. In the MMI, an applicant undergoes a series of short (less than ten minute) interviews in which s/he is 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 [https://gs.columbia.edu/content/forms-and-guides](https://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.

The Premedical Office can be a helpful resource to you in preparing for interviews. During the spring and fall semester, mock interviews are offered to help you practice and develop your interview skills. Additionally, our website compiles feedback from our students on their interview experiences at medical schools.

**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: [https://gs.columbia.edu/content/medical-school-interview-feedback](https://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.
- Be prompt. Double-check travel and lodging arrangements. Call ahead if you are delayed. Leave two hours minimum in case of delays, longer for traveling long distances.
- 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. 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 from several individuals and for that reason, it is argued, the MMI method yields a more objective assessment of an applicant’s intellect and character. While it may be difficult to prepare for the content of the questions you will face, it does seem possible to formulate some guidelines which should be helpful in answering many of these questions.

- Break the problem down into its component parts
- Explain the dilemma at the heart of the problem
- Propose a variety of solutions
- Discuss the pros and cons of the solutions
- Choose one and explain why it seems to be the best.

Remember: On the whole, there are no single correct answers to these questions (though, doubtless, there are incorrect answers). Differently put (and at the risk of overstatement), the emphasis in these interviews is on process (your listening ability, your cogitations) rather than product (the precise content of your responses). See https://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. Your letter is also an opportunity to correct, confirm, or clarify impressions from the interview.

Just a few years ago, it still seemed prudent to advise students returning from interviews to mail hand-written thank you notes and under no circumstances to send such notes by email; however, today most schools find it as acceptable to receive thank you notes by email as in the more traditional form. Speed is particularly important in writing thank you notes; so email obviously lends itself to this purpose. However, in the eyes of one admissions dean with whom we discussed this question, email notes, while “acceptable,” are not

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6 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. In it, you may want to recognize, with thanks, the participation of so many in the interview and assessment process.
“special.” Whatever format you choose to use, just be sure to get your thank-you notes written and sent with dispatch (not more than two or three days after your interview). To quote this same dean, “Good manners are always an indicator of personality, yes?”

After each interview, it also seems advisable to record every question you were asked and your response. This record may help you to prepare for future interviews.

Finally, we hope you will give your fellow premeds the benefit of your interview experiences as your predecessors have given you theirs. 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: https://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 tell your advisor. We know from experience that offices of admissions do not want their schools represented in such fashion. They will be concerned to hear about your interview experience and will try to make it up to you. 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. What you do during this period depends on your situation. 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 we maintain a combined relationship (Bioethics, Human Nutrition, Public Health, Toxicology). In any case, you may also wish to continue or resume service as a volunteer in a clinical health care setting. If you can afford it, you may want to squeeze in a vacation at some point. You should expect, however, to be in the United States and available for interviews from late-September until March of your application year. If you do make plans to go away during the application year, be sure to let schools know this when you submit your application, rather than a month before your departure. In general, the earlier your application is complete, the earlier you will be interviewed.

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. Whatever you do, keep in mind two questions: Are your activities during this period ones you would confidently present in an interview as evidence of your fitness for a career in medicine? If you don’t get in this year, will they serve subsequently to prove your continued commitment to a medical career?

Maintenance of Status
If you are a Postbac student applying with committee support, you will be required to register for “Maintenance of Status” during each semester of the application year (fall and spring), unless you are taking additional courses at Columbia University. The Maintenance of Status fee will allow you to retain the essential privileges of being a Columbia student even though you are not registered for courses (email, access to the libraries and eligibility to join the fitness center, or to receive student health insurance, etc.). If you are applying to medical school this summer with the support of the Premedical Committee, you will be automatically registered for Maintenance of Status for the fall and the following spring. 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.

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Footnote:
7 Fitness center membership and health insurance involve additional fees.
A Postbac who is reapplying will be enrolled for a second year of Maintenance of Status (unless otherwise enrolled at Columbia), but will not be charged a fee.

**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 incidentally 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 (enough so to make it possible for premeds to take the MCAT), we still recommend that you consider taking 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, 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 Professor Deborah Mowshowitz which explains the biochemistry content of this course. 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.

It is difficult to give general advising about additional courses and their usefulness. Please consult with your advisor. 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 frankly debatable whether these will make a difference. Further, it seems to us that in such a circumstance, it would be in your interest to 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 course work may compromise your record. You get no credit for going above and beyond, unless you do well. Incidentally, 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 (six and a half months) 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 at 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 [https://students-residents.aamc.org/applying-medical-school/article/application-and-acceptance-protocols-applicants/](https://students-residents.aamc.org/applying-medical-school/article/application-and-acceptance-protocols-applicants/)).

Remember that the longer you hold a place you are not going to take, the longer someone else must wait. No one, however, is asking you to make any precipitate decisions when you require more information before you decline an admissions offer you had provisionally accepted. Your choice of a medical school is something that
will affect your life for the next four years and beyond. It is a decision deserving of serious deliberation. And yet, while you may be understandably preoccupied with the fortunes of your own application, the Traffic Rules encourage you to regard the admissions process as a large-scale social undertaking in which you have responsibilities to your peers and to the medical schools alike.

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 her off its waitlist on May 1. 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, applicants are expected to make a good faith effort to communicate their plans to schools beginning in mid- to late-February, even as those plans may continue to evolve (applicants are not required to relinquish other offers until the end of April). The vehicle for this communication is the AAMC’s “Choose Your Own Medical School” tool. Some medical schools may require accepted applicants to use this tool. Others may not. Whether or not it is required by a school, you, the applicant, must take pains to understand the expectations each school has of you, the applicant, once it has offered you admission. Please refer to the detailed discussion of the traffic rules on the AAMC website (https://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.

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).

Applying to Additional Schools
As mentioned earlier, it is possible to apply to additional schools after you have submitted AMCAS. Before doing so, please consider whether these late additions (in effect, late applications) are likely to succeed where your timely applications have not. The earlier you make such additions, the better. If you do add schools, please notify your advisor.

Background Checks
It is common practice for medical schools to conduct background checks on applicants they would like to admit. These checks are intended to verify the applicant’s identity and to determine whether the applicant has a criminal record. 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 https://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. Many schools that are not currently part of the AMCAS program may nonetheless require background checks.

Application Status
It is a condition of receiving the services of the Premedical Office and the continued support of the Premedical Committee that you 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 for 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. Your advisor, often in consultation with the committee, will do his or her best to guide you through these difficult straits and to recommend appropriate actions to take. 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. 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 know 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.

Furthermore, we would love for our premed alumni to remain connected with the School of General Studies and the Postbac Program. We take pride in your accomplishments and new generations of GS premeds will take heart from them. From time to time, we invite Postbac alumni to campus to speak about their experiences in medical school and as practicing physicians. We hope we can count on your involvement down the road.

**Sending Application Updates**

As should be clear from these guidelines (if you weren’t already aware), applying to medical school is a protracted process, and often emotionally trying. Your advisor’s request that you remain in touch throughout the year is partly so that we can offer moral support and help you to endure the pangs of waiting to hear from schools, but it is also to help put the status of your application at any given moment in perspective, and to recommend constructive actions you can take after submitting your application and before receiving final decisions from medical schools.

There is a process of communicating with, of updating, medical school admissions committees, a process that is evolving even as we speak. Perhaps as few as five years ago, applicants would send updates if and only if they had landed on a school’s waiting list. The thinking then was that by sending such an update late in the spring, when schools begin to review their waitlists, the applicant would have signaled the continuing nature of their interest in the school, and this might improve the chances of an acceptance.

In more recent years, as the online application portals of the individual schools continued to develop, many began to 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 throughout the application year.

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
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. Evidence of your continuing engagement, learning, and growth is generally of positive interest to medical schools.

While the substance of the update is important, what is sometimes critical is simply that you remind the school of your continuing interest. Updates don’t necessarily have to include a paean to the noble attributes of an individual school, but this seems like a topic best considered with one’s advisor at the time you are planning to write an update.

One of the challenges applicants face, when pondering the prospect of initiating communication with a medical school is: How much is too much? How much is not enough? And how much is just right? Unfortunately, there is no formula through which to derive an answer. Or, at best, the answer is context-dependent. 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 for its content, length, organization, tone, style, clarity, pertinence, and timeliness. Incidentally, not all schools welcome updates. It’s important to read a school’s website carefully before sending them.

Rejection
Just as a successful batter is one who actually fails to get a hit in the majority of at-bats, so, too, successful applicants are most likely ones who will be rejected or passed over for interviews more often than not. If you are applying to twenty schools and are invited to interview at six, you are batting approximately .300, which, as in baseball, is rather good. But, whereas a batter who completes a baseball season with a .100 average may be sent down to the minor leagues, a medical school applicant to twenty schools with just a single acceptance (a .050 “batting average”) is going to medical school.

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 heard from a school one way or another, then (with rare exception) you should assume you have been rejected.

At the risk of mixing metaphors, applying to medical school can be compared to a game of musical chairs. There simply aren’t enough chairs for all the worthy applicants. As in musical chairs, the race (seat) is to the swiftest.\(^8\) At the end of the game, there are always potentially excellent candidates who have not found a seat. 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 https://gs.columbia.edu/content/reapplicants.

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. 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 send it along, but without screening its content. It is generally our experience that such letters are redundant.

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\(^8\) Assuming the applicant is otherwise qualified.
Additional letters will be uploaded to AMCAS. 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.

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 he or she might do so; however, this might happen if you have not received an acceptance to medical school and are on one or more waiting lists. Usually such new letters bear on research, studies, or other significant experiences in which you, the applicant, 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.

It is debatable how much help additional letters provide. If one begins working in a wet lab in October, how much of substance will the supervising scientist have to say about you by March? If no decision has been made by that point, is a new letter likely to be decisive? For better and for worse, this is a grey area. If needs be, we encourage you to explore it with your advisor.

**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 increase 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.”

Consider, too, that extremes of expression may be disconcerting to an admissions committee. In an interview, you would measure your words, even in expressing an opinion. And just as the medical profession prefers modest and conservative attire, it also generally favors circumspection in speech.

Medical schools also appreciate enthusiasm and strong conviction. If your interest in a school is genuine (and the fit is good), it may be a good idea to communicate this to the school. But context is everything—or, almost so. We therefore recommend that you confer with your advisor before sending a letter of intent.

**The Wait**

As demanding as the semesters of premedical science study may have been, you may find the application year equally trying, at least psychologically. 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.

Of course, once you receive your first acceptance, the clouds will seem to lift. But not every applicant is blessed with blue skies. We therefore encourage you to stay in touch with your advisor. If you and your advisor agree that you should begin to think about reapplication, he or she will guide you through that process.

Stay in Touch
No matter how your applications are progressing, we encourage you to remain in touch with the Premedical Office during this process. You are not bothering us by doing so. Quite the contrary: advising you about your application is one of our central functions. Often a quick phone call or email will allow you to voice some of your anxieties and give your advisor the chance to offer you some solace or to suggest constructive steps to take. While no two applicants are the same, we have probably come across similar situations before. With our experience, you will be better equipped to resolve your problems as an applicant than you would be alone. Keeping in touch with the Postbac Office throughout the application year is the best way for you to draw on our office’s 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.

Application Year Timeline

FEBRUARY
- Apply for the Certificate in Premedical or Prehealth Sciences.
- Attend the PMA’s annual Medical School Fair.
- Try to get on file with the Premedical Office all letters of recommendation from faculty and supervisors under whom you studied or worked prior to the orgo/bio year.
- Register for the MCAT.

MARCH through JUNE: Portfolio Reviews and Mock Interviews.
- Schedule Portfolio Review for sometime during the spring semester.
- Schedule a mock interview sometime during the spring or fall semester

APRIL
- Request letters of recommendation from faculty of courses taken in the current semester.
- Attend personal statement workshop sponsored by the Premedical Committee.
- Attend Application Year Panel.

MAY
- Ace your final examinations.
- Attend Class Day
- Order two sets of transcripts for yourself—one to refer to as you complete your AMCAS application and one to keep on file in case a school needs to examine them on a moment’s notice.
- Verify the accuracy of all transcripts.
- Early May: AMCAS application goes live. Start filling it out as soon as possible.
- Submit set of transcripts to AMCAS.

**JUNE**
- Work on AMCAS application including personal statement and consult with the Writing Consultant.
- Choose the schools to which you will apply.
- Follow up to ensure recommendations are in.
- Submit AMCAS as early as possible (but not later than June 30).
- Submit the following to the Postbac Office by June 30:
  - copy of the common application you submitted electronically to AMCAS, ACOMAS, TMDSAS, AADSAS, or VMCAS. The only common application we will accept is one that has already been submitted to the application service. (This is indicated in the AMCAS application by the submission date that appears near the top and center of the first page of your AMCAS application report.) Please upload a pdf of your application to your internal application.
  - All letters of recommendation must be on file by June 30.
  - Candidates who meet the June 30 deadlines and have taken the MCAT by June 21, receive assurance that their committee letters will be out by August 15.
  - Candidates who meet the June 30 deadlines and have taken the MCAT by the end of July, receive assurance that their committee letters will be out by September 1.

**JULY AND AUGUST**
- Work on secondary applications.
- Check your interview wardrobe.
- Take a vacation already.
- Retake the MCAT if necessary.
- Be sure to resolve any financial holds at Columbia.

**BY AUGUST 15 OR SEPTEMBER 1**
- Committee letters sent for students who have met Postbac Office deadlines. (For an explanation of the difference between these dates, see the detailed application timelines here: [https://gs.columbia.edu/content/forms-and-guides](https://gs.columbia.edu/content/forms-and-guides))

**FALL**
- Apply for the Certificate in Premedical Sciences, if you haven't already.
- Do things that confirm your commitment to a career in medicine.
- Be sure to resolve any financial holds at Columbia.
- Keep your advisor informed of the status of your applications.
- Automatic registration for Maintenance of Status.
- Consult the interview feedback forms on the Postbac website prior to your interviews.
- Complete interview feedback forms after each interview.
- Write thank-you notes to your interviewers.

**SPRING**
- Automatic registration for Maintenance of Status.
- Attend the PMA’s annual Medical School Fair.
- If you have decided to attend a particular school, let your advisor know.
- If you are waitlisted, let your advisor know.
- If you have not been accepted or waitlisted, consult with your advisor about your future plans.

**SUMMER**
- Matriculation at medical, dental, or veterinary school.
- Send us a picture of you at your White Coat Ceremony.
This is a general outline. See premed, predent, and prevet timelines for more details: https://gs.columbia.edu/content/forms-and-guides