

Pre-Med Essentials

How to become a competitive medical school applicant while at Rhodes

This document is meant to be an all-inclusive guide to what you need to do from your first year of preparation through the application process and, hopefully, your acceptance to medical school. Please reread, print, highlight and refer to this document at different times. We hope to constantly update it as needed. It is not meant to replace the important programming that we present and which you are expected to attend. Nor will emails with additional instructions or clarifications merely repeat the information here.

Many good books and sites are recommended. Our books and test sets are held under “Health Professions Advising” at the Barret Library Reserve Desk.

Factors in Medical School Selection that matter from your start at Rhodes.

Medical schools work hard to look at an applicant holistically, based on his/her undergraduate career, preparation, and personal attributes.

They are asking:

Can you do the work in medical school?

Will you do the program?

Should you be a physician?

Can you do the work in medical school? Do you have the academic record in sciences, as well as in all of your courses? Did you do this course work while taking full loads? Can you perform well on standardized tests, especially the Medical College Admissions Test (MCAT), as well as future board licensure exams? Not everyone can handle the academic or standardized test work required by medical schools.

Will you do the program? Have you juggled academic and pre-professional experience, along with work, service, and leadership? Have you explored health careers and exposed yourself to both patient bedside interactions and more hands-on clinical practices and procedures? Have you talked with health practitioners candidly about their lives and experiences? Do you know what you are getting into? Do you show a multi-year exploration and commitment to medicine? Have you read about current events in the medical and healthcare world and know what public discourse is ongoing? Do you know about a specific medical school’s program? Do you work through obstacles, and are you persistent? Can you articulate this ability? Not everyone has the commitment or perseverance to overcome the time and rigor obstacles of medical school.

Should you be a physician? Do you have the heart of a physician? Can you articulate why you want to be a physician and why you are well-suited to do so? Do you exhibit a life of service and commitment to helping others? Do you have attributes that patients look for in physicians? Do you have good people skills? Do you gain the trust of others easily? Are you honest and clear in communication? Have you made good choices and avoided risky behavior? Do you follow instructions well? Will you be a life-long learner willing to reinvent yourself as your chosen career changes throughout your life? Not every good and motivated student should become a physician.

Will you have professors and mentors who know you and will speak to these points when you apply to medical school? Students with stellar work and scores in all three areas listed above will still need someone to speak for them and to recommend them when writing an evaluation.

Early Preparation at Rhodes

Becoming a competitive applicant begins your first year at Rhodes. Be sure to place your contact information on the Health Profession Advising (HPA) email distribution list. Read HPA emails, come to our programming, always work towards your goal. Regular meetings with the HPA Director will allow you to discuss your progress with plenty of time for adjustments as needed. Your goal is to be ready to apply as a competitive candidate with the academic record, medical-related experience, self reflection and professorial evaluations to answer the above questions as early as May of your junior year. Join the student Health Professionals Society (HPS).

Your Academic Record at Rhodes: Medical schools will look at a BCPM (Biology, Chemistry, Physics, and Math) GPA and overall GPA. Although they will have access to all your transcripts from all the schools you attended, they will want you to take most of your prerequisites at your home institution. Often students take some summer work to allow foreign study and other activities and to more easily fit the four required one-year science sequences into three years. However, medical schools may question whether you are avoiding the rigors of Rhodes if you take more than one sequence in the summer. Remember, they are trying to ensure that you will be able to manage four to five sciences with labs concurrently during your first years of medical school. Evidence of time management skills that allow success with the rigors of academics including multiple sciences with labs coupled with research, work, sports, service, healthcare experience, etc. are valued.

Medical schools and admissions committee members can take into consideration the rigor of your program and life when evaluating your GPA. They can understand less than stellar starts, as long as good progress and improvement to the level that they expect follows. Whether they will consider you competitive in your third year after a weaker first year followed by four good semesters, or whether having your fourth year in hand to show six semesters of exemplary work is necessary will depend on the specifics of your situation. Contact us early so we can help evaluate your progress.

Most students find that adjusting to the rigorous work at Rhodes, both in class work and in outside preparation, requires some adjustment or fine tuning of work habits. Please visit and get to know your professors from the start. If you have trouble, make changes in what you do and seek help. Rhodes has a number of offices that provide help, including Ms. Kathleen Laakso in Academic Support Services, Robert Dove in the Counseling Center, and Carol Casey in Student Affairs. For contact information click [here](#). Also see Alan Jaslow's "How to Study Tips" in the Advising campus only folder go to \\fileserv1\acad_dept_pgm\Biology\Jaslow_Alan\Public\ADVISING Note: You must use an FTP program if you are not on campus.

Generally medical schools will not accept C's in any of the prerequisite courses, nor will they accept AP credit for the required science courses. However, they will take the same hours from appropriate upper level course work in the specific science department. Generally, except from a transfer student, medical schools will not accept prerequisite course work unless from an accredited four year college or university which grants a Bachelor degree. [AACOM and Texas schools are more lenient about some of these conditions] If you earn a grade lower than a B- in a prerequisite course, you can remediate this by repeating the course at Rhodes or another accredited four-year institution, or take appropriate upper level work in the area and receive a grade of B- or above.

All medical schools require one year sequences with labs of Introductory Biology, General Chemistry, Introductory Physics, and Organic Chemistry. Most want course work requiring writing.

Please see the online FAQ "How to fit in Prerequisites for Medical School" for examples of how our students schedule their course work.

In addition to the four one-year science courses that all medical schools require, you should take two additional upper level biology courses or Biochemistry from our chemistry department that are most like medical school courses (i.e., Biochemistry, Cell, Genetics, Molecular, Development, Physiology, Microbiology, Histology or Comparative Anatomy) to be competitive. There are other variable requirements at different medical schools. Attending our HPA programming and regularly meeting with the HPA Director will keep you on track.

You will want to start looking at a few schools, including your state institution, to see specific requirements. Some 14% of AAMC medical schools require one calculus class (either our Math 121 or Math 115). Most of this 14% will accept AP for this calculus. Three of the 131 AAMC medical schools want calculus through integration (either our Math 121 and Math 122 or our one semester Math 115) at college. Since 90% of medical schools do not require calculus, the physics they require and expect on the MCAT does not have to be a calculus based physics sequence. However, our current physics sequence at Rhodes does require calculus. A few medical schools require two math courses of any sort taken at college and will not take AP credit for these. Ten percent require biochemistry and 14% require a course like our Psychology 151. A few Texas schools require two English courses which focus on writing from a college English department only! So think ahead about where you want to go to medical school and plan your course work accordingly.

Remember, medical schools do not require a specific major and like all students to be passionate about their academic program, whether or not it directly applies to medical school. So don't think that every class has to fit a medical school prerequisite. Medical schools like that you will learn critical thinking and communication skills in all of your classes at Rhodes. Other courses offered at Rhodes that might be of interest are often called medical humanities at other schools. Examples include Medical Ethics, Ethics, Health Psychology, and Economics of Health. Sculpture or art classes have been recommended to hone fine motor skills and powers of observation. The Medical School Admissions Test (MCAT) and applications will require that you can read rapidly for comprehension and be able to critically analyze, as well as write a timed essay.

In 2008 the average GPA of students nationwide accepted to medical school was a 3.65 for AAMC schools, which award the MD degree, and 3.5 for AACOM schools, which grant the DO degree. Factors such as how you've raised your GPA or special circumstances during your undergraduate career contribute to the acceptance rate on occasion. Also applicants from underrepresented groups and students with commitments to a primary care career or a career working with underserved populations or in underserved locations are highly sought out by medical schools to meet the needs of changing demographics and disparities in healthcare availability. Many foreign trained physicians are accepted into residencies because fewer of our US AAMC graduates are choosing to practice basic primary care or to work in underserved areas or with underserved populations. AACOM schools are producing a larger percentage of physicians looking for these types of opportunities than AAMC schools, but they also have a growing number of graduates working in specialties and in well-served communities.

Please see our online FAQ "Recent Health Professions Acceptance Statistics" to see how MCAT scores and other factors affect an admission decision. Your GPA isn't the whole story. However, unless you fall into the exceptions mentioned above, students with a GPA below 3.4 are not usually selected for AAMC schools with their first application. This falls to 3.1 for AACOM schools. With repeated application and additional perseverance students with lower GPAs have been accepted, as you can see on the graphs linked with the most recent acceptance stats. However, remember that it took more than two applications for some students to be granted acceptance.

Getting to Know Professors: It's important for all students to meet their professors early in the term. For you, it will be critical to get to know your professors each term and by the end of each year have one or more possible writers for your future letters of evaluation. This is one of your responsibilities. Think about and keep in touch with some professors so that they will be able to say that they know you well, allowing them to credibly evaluate you.

Living Well and with Good Behavior: Medical school applications require self-disclosure of any criminal or social regulation actions. Most medical schools now have criminal background checks at some point in the application process. One can expect medical schools or future job sites to have some form of drug testing as well. A few medical schools ask for a letter from the Dean of Students addressing any social actions (non-compliance to campus social regulation) before acceptances are offered. More schools will be adding this request in the future. On one level, medical schools want to make sure that you do not have a criminal background that could

prevent future medical licensure. On another level, they want to see if you make good decisions and avoid risky behaviors. Admissions deans always say that early youthful indiscretion and minor social violations can be overcome by years of clean behavior and demonstrated maturity. However, our students who have offenses such as DUI, using a fake ID, or alcohol/drug violations as seniors have taken years to be seen as mature and living clean.

Honesty is one of those traits we expect of physicians, and it is expected at every part of your undergraduate and medical education. Respect for others is also expected of physicians. How you go about your life at Rhodes inside and outside of the classroom is visible to others. When you ask a teacher for a Letter of Evaluation (LOE), he or she will write it based on his or her observations of you and maybe in conference with colleagues. You don't want to have a reputation as a person who parks illegally, throws trash, comes to class late, is rude, acts out, etc. This doesn't mean that you can't be a normal young adult, but if you are truly a good match with medicine, you need to hold yourself to different standards than some of your peers. Medical schools and society do this and, hopefully, this is who you are anyway.

You have all heard about pictures from Facebook and other social networks being available to future employers and medical schools. Your sites shouldn't show bad behavior or poor judgment. Be sure to keep your pages and tagged photos policed. Being private isn't as important as being polite. You never know who is a friend of a friend, where they work or where they may be working one day. Always ask yourself how you want medical schools and future patients to know you. Some internet actions never disappear. Could some of those celebrities with outlandish photos ever be taken seriously as a physician? You know the ones that your friends post that you wouldn't dare post.

Are you a good team member? Do you work well with others? Do others like working with you? Do you communicate well? Take instruction well? Work well independently, but are not hesitant to seek answers from others when needed? As a medical student you will be part of many teams; people will depend on you while you are learning in a teaching medical setting. Although you may later have a solo practice in a small town and be very successful on your own, during your years at medical school you will be expected to be a good, contributing, trusted team member. Therefore medical school admission departments are looking for those good team members whom they need to make the hospitals and medical program run smoothly.

Clinical Healthcare Experience. Although most schools state that it is highly recommended that applicants have clinical experience, it is really a critical requirement. You should begin gaining healthcare experience no later than the start of your sophomore year. If you are interested in the GW Early Assurance program, you need to begin your experience as a freshman. Medical schools don't have a set number of required hours, but they want a long timeline and enough total exposure to reveal your commitment and understanding of good professional and clinical behaviors. Experiences can vary widely, but in sum should include both experiences that deal with bedside manner and those that deal with clinical procedures and practices. You should keep a journal of all your experiences, noting dates, times and what you saw (while maintaining confidentiality of patients). Ask every available health care professional the best and worst thing about the job and ask what else you should be asking him or her. Try to write how you feel about your experience. What did you see the practitioner do that you did or

did not like? These records of events, feelings, and changes in your reactions and feelings will be critical when you later write essays about your journey and understanding of medicine for your application. It's hard for some, but be sure early on that you aren't just journaling facts. You'll want to show introspection about your journey and growth.

Experience can be found in the form of a formal Rhodes internship, job experience, class experience (i.e. Chaplaincy) or volunteer experience and shadowing. The more hands-on the experience is for you and your mentoring physicians, the better. Emergency Room and Outpatient Clinic experience would most often be viewed as better than an internship in radiology or working for an individual practitioner, if you could only pick one. However, diversity of experiences should be added, and adding a clinical practice experience to a resume of ER work allows you to meet with the business and insurance officers of the practice and hear more about being a business partner from physicians as well. Any experience is better than none, and the more and varied experience, the better.

If you are interested in working in underserved communities or with underserved populations, you will want to show evidence to that effect by seeking out such experiences now.

At least some of your experience should deal with messy, stressful situations. They want to make sure that you can handle those 18 months or more of labor at a teaching hospital. Can you handle blood and other body fluids? If all of your other experience has been in quiet practices, will you be able to deal with diverse people from different backgrounds and make it in a city ER, for example?

Rhodes' Memphis location offers pre-med students a wide number of medical venues with opportunities for clinical healthcare experience.

Check the following sites to find potential medical experience venues:

[Kinney Program](#)

[Career Services](#)

[Chaplain's Office](#)

[Fellowships](#)

Continue your experience through your application year. If by chance you are not accepted based on your current record, the next application will include what you've done lately and how you've continued to exhibit your commitment and enhance your experience. Repeat applicants, who have not done anything additional since their application a year ago, don't do well when reviewed in the current cycle.

A life of Service and Altruism: Medical admissions personnel talk about medicine being a life of service and how physicians need to put others first. They look to a life of past altruism as a way to predict future altruism. You may volunteer extensively in healthcare, and thus dually benefit by gaining experience but these volunteer experiences could be viewed as mostly a benefit to yourself and not altruist. Some non healthcare related experience, even if it is in a healthcare setting, is important to have in order to demonstrate your altruistic nature. Again, we

are fortunate to be in Memphis where Rhodes has many service partnerships and where it is easy to find a way to give back to the community and help others.

Leadership. Not everyone is a leader. Leadership can be demonstrated through seeking and earning elected offices or through being that person who sets example for others to follow. It is not important to join a lot of activities or organizations while at Rhodes. It is more important to do a few things or even one thing well and with a deep commitment. Sometimes this leads to the offer of leadership positions. If it is in your nature, seek those opportunities. Many feel that being a physician in a community is a leadership position, as your patients, and sometimes greater community, are looking to you for answers and guidance.

Ease with Others. Medical schools have reacted to the public's dissatisfaction with seemingly cold and uncommunicative physicians. They are looking carefully for applicants who, in addition to everything else, put people at ease and communicate with ease. This means that it is hard for introverted and socially anxious students to be admitted. Do talk with the HPA Director about things that might be done early to work on social ease and skills.

Research. Years ago research was the extracurricular activity that was expected of premedical students and one that often substituted for healthcare experience. Today this is not the case. Research is one of many in-depth commitments that go beyond simple class work and show that the student has a passion and scholarly interest beyond that of other students. A senior music concerto or business internship would similarly demonstrate this. Research should never be seen as a substitute for the required healthcare experience, even if it is medical research.

Research is critical if you are going on for a Ph.D. It is not required by medical schools, although it is a good thing to have to be accepted at the best medical schools. I hate to suggest anyone do research if he or she isn't interested in it. In fact, not all research experiences are viewed with respect by medical schools. At other institutions, one's research might just involve following recipe instructions and acting as a glorified bottle washer. Your specific responsibilities are easily determined with questions about the research project goals and conclusions in interviews. At Rhodes we have a vast number of on-campus and off-campus research opportunities, all of which should help students to understand the research process and work toward an end product result. Often our students' research leads to publications and/or meeting presentations. Medical schools with large research programs and boast-worthy reputations are often happy to see applicants with research experience. Such a student may work more easily with research while in medical school, publish, and be more competitive for top residencies and later top fellowships. Most state medical schools and programs looking for future primary care physicians are more interested in your ability to work with people than the possibility that you will be involved with future research.

Preparation for the MCAT; To be taken, Sophomore, Junior or Senior Year.
Also a start on when to apply.

The ideal time for you to take the MCAT depends on when you plan to apply and when you are prepared for the test.

This test and your GPA are the first two filters used in medical school admissions. There is a correlation between MCAT scores and later board scores.

The MCAT assumes that you have completed the four one-year science sequences. It tests on this introductory material. However, no institution's one-year sequence covers all of the relevant introductory material, so you will want to keep your textbooks to review, study and learn throughout your years at Rhodes. The topics the MCAT covers are available on the MCAT site and in various guides. The Official MCAT Guide by AAMC is especially worthy and is on reserve at Barret Library.

The MCAT is now given throughout the year. Most medical schools have rolling admissions. If your goal is to go to medical school the fall following your graduation from Rhodes, we recommend that you submit a medical school application in early June and have an MCAT score to report from April, May or, at the latest, June of your junior year. A few students are prepared to take this exam at the end of their sophomore year. A fair number of students do not apply until they are seniors and can thus take the MCAT during their senior year. While this approach allows for longer preparation, it also means that this applicant must wait a year before starting medical school. This is very large cohort nationwide. Currently MCAT results are reported 30 days after the exam and can be used for the next two application cycles. Taking the test early in the spring gives you July and August to repeat the test if you need to or if an emergency arises. September MCAT dates from the fall of your application year are probably too late for most students and most schools with rolling admissions. Students with such late exams are usually interviewing for wait lists at that point, if there are even any interview dates available. A few states, such as Arkansas, will not look at any applications until the fall, so August/September MCAT dates for those schools should be acceptable. If you are not prepared to do well on the MCAT until the fall and are not counting on Arkansas or the University of Tennessee, you should consider delaying your application until the following year. In all events you should be discussing your timeline in advance with the HPA Director.

Read about the MCAT in these online documents at the MCAT site: "[MCAT Essentials](#)" and "[Registration Tips](#)". The application for the MCAT is online. Application is open from 2 to 4 months before each exam and will be announced both at their site and through our HPA emails. Be sure to register for your test as early as you can to ensure the closest testing location and first choice of dates and times. You can only register for one test time at a time. After completing a test on testing day, you can register for a new test date.

Fee waivers and assistance for the MCAT registration exist and are explained at their site. Such waivers are also available for the application service fee when you apply to medical schools and for each school's secondary application fee request. Currently, fee assistance starts at three times the [national poverty limits](#). Allow for enough time for the AAMC and other institutions to evaluate your application for assistance.

The scores for Verbal Reasoning (VR), Physical Sciences (PS), and Biological Sciences(BS) will be reported on a scale ranging from 1 (lowest) to 15 (highest). Your raw score on the Writing Sample (WS) will be converted to an alphabetic scale ranging from J (lowest) to T (highest). Usually a balance of scores is expected among the different areas. Aberrant scores in any one

area will need to be addressed. Some evaluators and schools have commented on the importance of the VR over other scores; many students can do well on exams, but medical students must also comprehend the large amounts of reading they will get their first year. In 2008, the national average for accepted students was a 30-31 with 9-10's for subscores. O or P was the central 50% for the essay section score. Please see our FAQ "Recent Health Profession Acceptance Statistics". In general, MCAT scores correlate with GPA. Again, both scores are important on the low ends in determining if the school will look further at you. However, there are no hard and fast rules about minimum scores at any school. A good guideline for most people is that an MCAT score below a 27 and/or one with any subscores below 9 will not be competitive for AAMC schools, and an MCAT score below a 22 won't be competitive at AACOM schools. We see exceptions for applicants who have overcome adversity, have succeeded with heavy time commitments such as work, and those with commitments to future work with underserved localities or populations or from underrepresented groups. Medical schools do look at all aspects of an application. However, for most of our students, these guidelines will hold.

Experience has shown that an organized and systematic review of the science topics tested on the MCAT can result in a considerable, sometimes dramatic, improvement in scores. Many students will have taken some of the courses for the tested subjects as many as two or three years before the test. It is also important to practice writing on a topic for 30 minutes in an organized and clear manner. The exam rewards those who can remember great amounts of material and those with excellent analytical and reasoning skills. There is a great deal to review, but it can be done. Some of our students have reviewed throughout their years at Rhodes and take one month for concentrated study. Some take an entire summer (but then have late score reports for most schools). Some students study on their own, or in groups. Some students sign up for exam preparation courses.

The students who say they thought a commercial study preparation course was worth the money said that they would not have studied systematically without paying for such a course and its schedule. Some said that they would not have studied unless someone had been paying that amount of money. A few say that they liked having someone they could ask for help when stuck on practice questions. But remember, your Rhodes professors are a great resource for such questions, even if you are out of the relevant course. There are many fine review resources available: books, sets, online help, and material on reserve in Barret under HPA. Most folks use one or more of these many resources. Practice sample questions and test overviews are available as well. Rhodes Career Services offers mini practice exams for the MCAT.

The following discussion should not be considered an endorsement of any private test preparation course over your own or group study for such tests. This discussion should not be considered an endorsement of any specific company over any other test preparation organizations. Kaplan and Princeton offer MCAT preparation courses in Memphis. The dates and procedures of their classes differ. Both offer a fee reduction based on need. Generally, if you receive government funding for school such as a Pell grant, you can receive a 40-50% reduction. Rhodes has been awarding need-based scholarships for one or more of these courses per year to students, as donated by Princeton and/or Kaplan. Other's commercial preparation reviews are recommended by some students nationwide and have on-line tutorials.

Practice sample questions and overviews are available at the online MCAT site (<http://www.aamc.org/students/mcat/>). Many books of sample questions are available, some at the Rhodes HPA reserve collection at Barret. Rhodes Career Services offers mini practice exams through Kaplan as well.

The MCAT is given online at testing centers, so reading text for comprehension from a computer screen is a skill you will need. You can practice this by reading medical current events from different sites in the years or months leading up to your test. This may also give you more insight into your chosen career.

After you have studied well, you should purchase and take at least one on-line practice exam from the MCAT site. There are some nine to thirteen versions of these publicly available practice tests. These tests are the same as those used in exam prep courses. Some questions and exams are available from the MCAT site for free. Read about what you can bring to the test site on the day of the exam before you go. In the past, some sites had computers that allowed highlighting on the text; others might allow underlining. Be aware that when scrolling down to questions below text and then back up to the text, some have found that such highlighting was lost. Some sites supply plastic sheets and dry erase pens for your use. You should attempt to bring your own sharp and moist dry erase pens to use. Other sites use paper and pencils. Bring your own sharp pencils and eraser. Sites allow earplugs for isolation, but not ear buds if plugged into devices such as Ipods.

In general, you don't want to retake the MCAT unless you need to. Medical schools vary in how they handle repeated tests. For example, some schools may weigh the most recent, while others may average scores. Many applicants retake the MCAT to improve scores.

Your Letters of Evaluation (LOE) - And the Jr Form

Medical schools read and consider LOEs very carefully. They are an important part of the review process. Medical schools want honest evaluations that critically describe an applicant's attributes, capabilities and experience. Rhodes gathers letters for you (as directed by the junior application discussed below) to post or upload to the schools and/or to the application services.

Currently we prepare a packet or composite letter, which includes all of your individual authors' comments which are easily attributed to them. See the sample composite at our HPA campus only document site - \\fileserv1\acad_dept_pgm\Biology\Jaslow_Alan\Public\Health Professions Advising. Note: only available using ftp program off campus. The form includes comments about your participation in HPA and meeting(s) with the HPA Director. It also includes important identifiers for you and the titles of your LOE writers. We add a statement about our specific courses - i.e., that organic has only a second semester 2 hour lab - as well as data sheets about Rhodes and our past students' acceptances. The latter helps schools that have not had our students matriculate recently to better put our students into a context.

We do not write a committee evaluation or rank you other than the individual LOE's rankings given. As per most medical schools, our packet usually has letters from three professors, two of which must be science faculty. An optional fourth letter can be from a clinical mentor if she/he

can comment on your attributes and behavior in a clinical setting. We will need the complete title and all contact information for any non-Rhodes authors. If the author is a physician with an assistant, include the assistant's information as well. If such a clinical letter is not available early in the cycle but is possible at the end of the application summer, the packet of three professors can be prepared and uploaded early, and the clinical letter can be uploaded later in the summer as a second upload (using the same LOE request number).

In the absence of a clinical mentor who could write an LOE, some students have used research mentors or community service mentors. Applicants applying to AACOM schools for a DO degree should seek an additional letter from a DO (if that isn't already their fourth letter) explaining their understanding of osteopathic medicine. Except for the one Texas osteopathic medical school, we prepare a separate packet with a different front and back for applicants applying to osteopathic medical schools. Therefore students applying to both allopathic and osteopathic schools will have two packets made, but generally with the same three or four LOEs within. On rare occasions a LOE writer may be willing or interested in writing an allopathic and osteopathic version of his/her letter. If you are looking towards an MD/PhD, you will need a modified packet or a separate packet with additional letters relating more to your abilities as a researcher. Different programs have different letter requirements. You will need to investigate this and discuss it with the HPA Director if you are seeking a combined degree of any type.

If you plan to apply at the end of your junior year for medical school matriculation in the fall after you graduate, identify the names of LOE writers early and throughout the winter of your junior year. Before asking professors, be sure to talk with the HPA Director about your possible writers and see Comments on requesting letters of recommendation (our HPA campus only document site - [\\fileserver1\acad_dept_pgm\Biology\Jaslow Alan\Public\Health Professions Advising](#)) Note: only available using ftp program off campus).

When you have settled on professors, and they have agreed to your request, you can submit these names with your junior form for medical school application, along with a waiver or non-waiver of your rights to see these letters. You are not required to waive your rights, but most medical schools put much more weight on letters for which the student has waived his or her rights to read. In that case, they are considered more candid and thorough in evaluation.

It is your responsibility to supply your writers with any materials you want them to have or that they request. We will not pass on any of this information.

During the school year, we give letter writers four weeks to complete these letters. We need the letters by the end of May, no matter when you decide to put in your application. [Do **not** confuse your LOE writers by telling them that you won't get your MCAT back until or maybe won't apply until June/July, etc. We need their letters earlier, and we need for you to tell them this. Reassure your LOE writers that letters are required by Rhodes early in the process!] This allows us to finish all of our letters at the start of the cycle, so that folks who put in early applications, as recommended, have letters waiting. Also, some schools download letters and get files organized even before they see an application. All of our dates are planned to help you, the applicant.

Similarly, when you submit your application should not be determined by when letters are ready. Rather than wait for the letters to submit your application, you should submit your application early and send the letters as they are ready. Many schools will not download your letters until you have submitted a secondary application, if requested. Some schools download independent of applications, so that they have their files in order as materials become available. In your AMCAS application do not be confused by the request to "upload letters now" (or similar statement). You never upload a LOE. This portion of the AMCAS application allows you to prepare a LOE request with its unique and new identifying number for your Rhodes packet. More on this will follow with comments about that application.

There are some medical programs, such as LSU schools, which request three scientists, instead of the usual "at least two." Arkansas, the University of Alabama at Birmingham and Southern Alabama request additional letters from non-academic people, such as bosses or coaches. The University of Southern Florida asks for a peer letter. These additional letters can come independently to AMCAS or the schools from the individual additional writers. Please discuss these cases with the HPA Director. Do not send additional letters to schools that do not request them. They do not want them, which is why they do not suggest them.

If you really don't want the HPA Director to assemble your letter, one of the other members of the Health Professions Advising Committee (HPAC) can do this. The Director still must sign the letter, but the other HPAC member can assure you that the composite letter was assembled without modification or additional comment beyond campus participation.

We currently upload our final assembled packet to VirtualEvalsClient or VEclient. This site then electronically distributes to AMCAS (for most AAMC schools who get their letters from there), TMDSAS (for Texas state schools and residents), and other individual schools (such as a few AAMC schools and all AACOM institutions which will download directly from VE). You will get an email from VE when we have uploaded your letter noting which schools or application services have access to download it. These services and schools are notified of the upload as well. They may or may not download it immediately. There are two AAMA schools who still ask for hardcopy versions to be mailed, only if and when they request a secondary application from you. If this is your situation, you need to email the HPA Director with the address to which you are directed to have your letters sent when you receive such a request. If you have applied to one of these schools, the HPA Director will inform you when your packet was uploaded for other schools. Other schools will send you a request that you gather, prepare or arrange your letters when they ask for a secondary. Remember, for those of you with timely applications, this has already been done, and the schools will automatically download your LOEs as desired from VEclient, AMCAS, or TMDSAS. Even so, you may still get an automated request for such letters from your schools when they ask for the secondary application.

On the junior form (letter request form) we ask for a tentative list of medical schools. We will not use this list when uploading your letters. We will ask you to email the final list when you submit your application to AMCAS, AACOMAS and or TMDSAS. If you add schools to your list later, you must inform us so we can keep track and allow access if needed.

Where to Apply – Deciding on Schools

Although you will not be asked to decide finally on schools until you apply via an application service (below), it is very important to consider schools throughout your pre med preparation, especially before the names are needed for your application. Typically students start doing the harder work on school study and finalizing their choices during their junior year (for those wishing to matriculate the fall after graduation).

Your first decision, and one we hope you have considered earlier than your junior year, is whether you are interested in allopathic medical schools (AAMC, and award the MD degree) or osteopathic medical schools (AACOM, and award the DO degree). Please see other discussions and read resources and links to understand these different programs and philosophies. Some students who are interested in osteopathic medicine and perhaps have academic statistics that are more competitive for these programs apply to both DO and MD programs. However, a commitment and understanding of osteopathic medicine is required for acceptance into those programs. We have had top students choose to apply only to DO schools and some who chose to go to a DO program when accepted to both MD and DO schools.

"There are no bad U.S. medical schools" is an oft-heard statement. The accrediting agencies for medical schools ensure that every medical school adheres to high standards in order to remain accredited. Furthermore, National Board Exams and other standardized national exams are given to all medical students. This has the effect of ensuring that all medical schools cover certain fundamentals in their curriculum. There are, of course, strengths and weaknesses in individual medical schools and differences in the difficulty of obtaining admission to different schools. Different schools will have different schedules for class and clinical work, or may approach the curriculum in an integrated way, instead of topically. Some schools have just started a new curriculum or will be doing so while you are there. Some schools have various teaching hospitals and others have only one. Some institutions have special opportunities or initiatives not shared by all. Research or rural care opportunities will vary widely. All of these school-specific topics need to be explored.

For most public medical schools, the chances for admission are determined in large part by the applicant's state of legal residence. State-supported public medical schools give preferential consideration to residents of their state. There is usually an upper limit imposed by legislation or administrative edict on the number of nonresident students accepted at a state school. Be sure to check individual programs to see if you are eligible to apply and how many out-of-state students are taken each year. Some state schools such as Texas-Dallas, Texas-Houston, University of Michigan, UCLA, and many others have reputations as outstanding as some of the best private schools and accept a fair proportion of excellent applicants from throughout the country. Some states take only residents, others only applicants from adjacent states. It is up to you to ensure that you fulfill the residency and non-residency (if any) requirements for all schools to which you wish to apply.

Private medical schools recruit from the national pool of applicants. These include schools with lofty reputations such as Harvard, Johns Hopkins, Washington University, Stanford, Baylor, Duke, Emory, Vanderbilt and others. As might be expected, the credentials of students accepted to these schools are outstanding. Many other private AAMC schools take competitive students with a wider range of grades and MCAT scores. Such schools were some of our recent students

have matriculated include George Washington, Jefferson, Wake Forrest, Case Western, Boston University, Drexel, and NYU.

Most osteopathic medical schools are private and recruit nationwide.

Nationwide, the average number of schools to which students apply is 12-14. At first consideration, it seems that if one is most likely to be accepted to his/her state medical school, and if that is his/her first choice, then that should be the only school applied to. However, students occasionally do not get into their own state institutions but are accepted to other institutions. This can be because of how one connects on interview day, or what the people in the acceptance process are thinking or prioritizing in any given cycle. So if you are willing to go to another school if not accepted to your first choice that cycle, you should apply to a number of schools. You should only restrict your schools to in-state schools if you are willing to wait to reapply to your in-state institutions if you don't get in the first time rather than go to another school that cycle (this is a rare choice). It costs money to apply to each school, so cost of application and later attendance will weigh in. However, these front-end costs are small relative to the overall cost of your future education. Also, remember that these school-specific application costs may be waived or reduced similar to the MCAT and Application service costs. Travel costs, however, are always yours, and can be quite large if you choose to apply to and then fly to many interviews, as you have agreed to do.

When deciding where to apply, there are a number of resources available to you. Guides such as the latest edition of AAMC's "Medical School Admissions Requirements" (MSAR) are available on reserve at Barret. Many other guides are available commercially, and some Web sites summarize information in a consistent manner as well. Guides can be used as a first study to see generally what residency, academic and course work are required or sought in applicants. Remember, averages and central tendency ranges for statistics means that students are also accepted above and below those medians and averages.

The advantage of all simple guides is that schools are described in the same format. The schools are asked to answer specific questions when the authors write the books or Web sites. This is also their biggest disadvantage. We have found inconsistencies between such guides and the individual schools' admissions Web sites. So once you are interested in specific schools, be sure to visit their own sites and discuss them with the HPA Director. Inconsistencies are due to two types of errors. One error occurs when the institution's policy changes after the data were gathered. Another type of error occurs when schools are forced to put their criteria into only the format allowed. For example, three medical schools are listed as requiring two calculus courses, but they really want calculus through integration, which is often only done in the second semester of a two- or three-semester sequence. They are perfectly happy with our one-semester Math 115 which does complete integration. In fact, that in combination with a statistics course would be preferred, but medical schools do not have the option of listing their requirement that way in the guides. Also, a specific upper-level biology or chemistry course may be listed as required or recommended in the guides, but on the school site it sometimes is just one of a number of alternate options.

So if you seem to meet a school's requirements and appear to have a reasonable chance of acceptance according to the simple guides, you should then further investigate the school by reading the school-specific admissions information. Don't forget to read about some schools in which you were interested but course work in the guide seemed to indicate you could not apply. Double check the school's own admission information, or consider taking a further course if required in the remaining time. Other than the four one-year required science sequences, most schools will take a promise (later fulfilled) to take required course work before matriculation.

Although you can see where past alumni have attended, it should not restrict you from applying to other institutions. We are a small school, and there are many schools where our students rarely apply due to residency requirements or regional attraction.

Your application to Medical School

There are three US medical school application services. You will be applying through one or more of these. If you are applying to AAMC schools, you will be applying via [AMCAS](#). If you are applying to AACOM schools, you will be applying via [AACOMAS](#). If you are applying to Texas State System schools and are a Texas resident, you will be applying to those via [TMDSAS](#). Note: some non-Texas residents applying to Texas state system schools will use TMDAS as well.

There are very good instruction guides, tips, and FAQ's at each of these application sites. Be sure to read the appropriate cycle's information when it becomes available.

All of these application services open in the spring to allow students to start an account and to start filling in data and printing transcript and LOE packet requests before submission. If you paid for an application in a prior year, some of your previously entered information may be available for the new cycle. If you did not submit an application the previous year, then any work will be lost when the new cycle opens. This is why it is important to work offline for long essays and to be sure you have opened an account in the correct cycle year's application.

AMCAS, AACOMAS, and TMDSAS allow applicants to start working on the coming year's application in May. Submissions can be made with payment as soon as the service opens for online work with AACOMAS and TMDSAS, and the first week in June for AMCAS. Be sure to investigate months in advance, what you need to receive a fee waiver or reduction if you are in financial need. If letter perfect, your goal should be to apply as early as possible to an application service. This can be done before you know your MCAT scores, before your transcripts are requested (but you should do this as soon as the application service opens) and before your letters are ready (but for most students, this will already be done or in progress). In other words, all of these parts are somewhat separate. Your first priority is to be error free and letter perfect; your second is to be early. Later, the order in which applications will be reviewed is determined by the date of your application, even when some data comes later (i.e., a MCAT score). One of the fields that can be changed even after submitting an application to AMCAS is the date of an expected future MCAT.

One advantage of an early application is that most schools have a rolling admissions process and book limited interview spots on a first-come, first-served basis. There is also a financial

advantage to applying early. You have more interview dates to choose from, allowing you to find cheaper airfares and convenient times. Sometimes, with enough time and options, one can make arrangements to string several interviews together into one trip.

The first thing you should do once the application service opens is print a transcript request. Do this for each of the US colleges and universities where you earned credit, even if those credits were transferred to Rhodes. Request that these transcripts be sent AFTER CURRENT TERM grades are recorded. For Rhodes, this means that if you are a current student, you can print this AMCAS, AACOMA, or TMDSAS request before you leave at the end of the term and attach it to our own in-house transcript request form. Take a highlighter and highlight that the registrar is to wait for the current term's grades to be recorded before sending to the application service(s).

The time that it takes to verify your transcript varies with when you submit your application. AMCAS takes from 3-14 days to process at the start of the cycle. This slows to 4-8 weeks later in the summer. Some years, competitive applicants who applied later in the cycle found that their transcripts were not verified before medical school application deadlines passed or late interviews were full. This is another reason to apply early in the cycle and don't consider deadlines as relevant information if you don't already have your application submitted and your transcripts verified well in advance.

If you do not have an MCAT score in hand, it is a gamble of several hundred dollars to apply before you get your score, but if your score is competitive it is critical to have an early application for most applicants. If you take an early spring MCAT, you may have a score in hand before mid-June. Remember, even if you want to retake the MCAT later in the summer, you can indicate this decision and change it on the AMCAS application after submission. You should also email any individual schools if you want them to wait to decide on your application for a later MCAT score than initially indicated.

Some AMCAS schools conduct a preliminary evaluation of the application received from AMCAS, based on GPA and/or letters even before an MCAT is received. Most schools wait until GPA, application, and MCAT scores are available. It depends on the school as to when letters are downloaded.

Course work to enter on the application: One section of the application will request that you enter all of your colleges and courses per term. Follow their instructions. (For Rhodes PE classes leave the hours box blank, instead of entering zero. AP courses are entered as they are in the semester that they are found on your Rhodes transcript.) You will want to have your unofficial or official transcript(s) in front of you while completing this section of the application.

15 most significant activities: This is a section of the AMCAS application. Similar sections are found in the other applications. You do not need all 15 of these. These are your most significant activities or honors that allowed you to prepare for medical school or took time outside of course work. Currently you are allowed an ample word or character count to explain these activities. Do not use all of these allowed words unless needed. The space will allow you to characterize what you did for research, if research was one of these. Presentations, duties, skills you learned and how these things will make you a better physician could all be added here. HOWEVER, do

not repeat the same details and explanations here and in your personal statement. For example, when reading in your personal statement that you shadowed physicians during your sophomore year, the reader should be able to find this item in your list of “most significant activities” and determine how many physicians, hours and hours/week this included. Details of what it meant to you and how it will make you a better physician can go in the personal statement. If not, they can go here as space allows. If it is allowed by the formatting restrictions, some applicants put this explanation as listed items or phrases, rather than as a narrative. Formatting of this text varies from year to year.

Your personal statement: As discussed in our yearly HPA programming, the personal statement is extremely important. It provides the schools with the opportunity to make evaluations about you as well as your writing skills. Along with LOEs, the personal statement is one of the only ways that schools are introduced to how you reflect and think before they meet you, if you’re invited for an interview. Hopefully, you have been working on your statement for a while.

You should carefully check the final version for spelling, punctuation, grammatical errors, and organization. There is a lot of advice available to you on writing a personal statement. Be sure to look at “Write for Success” by NAAHP (on reserve at Barret, in the HPA holdings).

Because there is a lot of differing advice about how to write your personal essay, please know that there is not one correct way to write your statements or a single correct essay. Start early on several different essay themes or topics. This is a way to avoid getting bogged down in trying to write the one perfect essay. Also, the pieces that you don’t use may be perfect for the additional secondary application essays required after the initial application. Keep working on these extra paragraphs and different paragraphs after you have finished your personal statement so they will be ready to paste into your secondary applications.

At Rhodes, you can get help with mechanics and voice from the writing center. There is also an interdisciplinary course, ID 331, called “Introduction to Postgraduate Scholarships” which is one way to work on your personal statement, although they often recommend stylized essays that do not allow medical schools to get to know you as a person. The HPA Director will read your statement once for over stylization and voice. Be sure to have the HPA Director read your essay early before you are too wedded to one essay. Have many other worthy editors (friends, students, professors, family) help you check for voice, grammar and continuity issues.

After sitting through many discussions with fellow advisers, medical school deans, and their admissions staff, as well as several mock admissions committee meetings, we have learned a few key points that should apply to writing all personal essays. All of this is in recommended books and other sources, but important points that apply to all medical schools are listed below.

- Schools do read your essay very carefully.
- It should be truthful and accurate.
- It should be well written and without punctuation or spelling errors.
- Medical schools want to learn whether you can communicate complex thought and introspection, not just a write a biography or a list of events.
- Anything that you put in the essay is fair game for discussions at interviews.

- Medical schools want to get a sense of who you are and how you got to this point. They want to see that you have thought about your “journey”. This word, journey, came up many times.
- They do not want a repeat of events and experiences that you have already listed. However, the essay could be a chance to further explain what you did through one (or more) of these experiences and what it meant to you and your journey. Again, they want introspection.
- If you say that you are committed to a life of helping folks through healthcare, you must be able to support your claim with your experiences. They look to see if your statements are supported in your listed experiences.
- You may use one of many topics and approaches.

This is an opportunity to explain a low grade or semester. However, you must communicate how you have grown and succeeded beyond this weak spot, and your record needs to support this growth. Be positive, not negative. Never use an angry voice, or one that a reader might read as angry. This is a place where any questionable legal or social actions and subsequent growth need to be explained. Again, explain and discuss your post-event growth and maturity. Don’t make excuses or blame others and circumstances.

The above paragraph can refer to a life-changing event as well. Whether you wish to discuss such an event or condition may depend on whether it is needed to explain a bad semester or your “journey.” However, if it is in your essay, it is then fair game for the interview. Things you do not want to discuss in an interview but want the reviewers to know could be presented by a trusted letter writer instead, the content of which legally should not be revealed during an interview.

Strong beliefs may be critical to your journey and of course they may not affect your tolerance of others and ability to be compassionate and act professionally beyond those beliefs, but if your record does not support such tolerance and ability to be truly empathetic to others with different beliefs, you may be viewed as a risk. Remember, any number of folks will be reading these letters who have their own beliefs or definition of a professional practitioner’s manner with others.

Don’t use overly cute trick hooks in the first paragraph or famous quotes unless this is really the way you communicate. Remember, the readers want to know who you are. They may use this essay for your interview, and past students have been asked about such quotes and authors. Readers will not be happy to conclude that someone else wrote your essay or seemed to. I know there is a lot of advice that seems to differ from this point, but if you do a good job of introducing yourself, showing something about who you truly are and how you got to this point, it will be to your best benefit.

If this is your second application for this medical school, you should address what has changed and what you’ve done to become more competitive this time! Schools to which you applied the previous year will use your previous essay to compare and to see why you are more competitive this year. Always be positive and explain, but do not make excuses.

Work off-line in a word processor to write and edit this statement. However, the AMCAS application currently counts all characters and does not allow for anything other than simple text. Therefore, before cutting and pasting your statement into this section, be sure to save it as a .txt document and remove extra spacing and blanks. Indents, if desired, will be done as spaces. Blank lines, I believe, count as characters. Be sure to read the relevant application service documents about this. You want to ensure that your statement can be read.

Letter of Evaluation (LOE) Requests: LOEs themselves were discussed above. However, how they are incorporated in AMCAS for most schools is discussed here. Within your AMCAS application, you need to generate an LOE request for our Rhodes “committee packet” for most medical school. This should be created with the HPA Director and his contact information as the single and primary author. Schools will see the individual letters and contributors when they see our packet. The single author name above is simply so AMCAS knows your file is complete when they get the composite from Dr. Alan Jaslow.

There is an option to add secondary authors for the LOE request, but the medical schools don’t see this section of your application. Even though you will enter the schools that you want to receive your application within AMCAS, you will also need to add each school’s name to be associated with the LOE request you use for our Rhodes packet. There is not an “all schools” option for this at the current time. A few schools may continue to get our packet directly from VirtualEvals, or us sending in the US mail. These schools will be listed to receive your AMCAS application, but not associated with the LOE request for our packet. For TMDSAS you will similarly need to generate a request for letters for a Rhodes packet to be recorded and received. Although this required generation of a request also creates a specific LOE request number, we do not need that number currently (when posting with VEclient). Instead your TMDSAS ID number is the only one that we need to route your letters once you have generated a LOE request.

The schools where you apply. If you add a school to your application, be sure to remember to let the HPA Director know by email and add this new associated school to your LOE request if an AMCAS school. Any additions will require a resubmit (update) that won’t change your AMCAS original submission date. If you decide to no longer pursue application to a given school, be sure to let the HPA Director and the individual schools know. This is polite as it saves them from keeping further track of your records. Remember that you may be coming back to apply to these programs as a resident or fellow, so good manners are important. At the current time, I do not think that you can formally remove a school from your application, or if you can, you cannot remove all of them. Check current instructions.

If you decide not to pursue any application further in a given year be sure to let the HPA Director and the individual schools know by email. Do not simply stop sending them information. While it is true that if you don’t turn in a requested secondary application on time, they will drop you for consideration but this is not good manners or communication.

Secondary Applications

Secondary applications are requested differently by different medical schools. Some state schools will send all residents a secondary request. Some private schools automatically request a secondary application from all applicants even before an MCAT score is in. Some schools only ask for secondary applications from students who meet basic statistical requirements. Some schools, after careful consideration of available documents, only invite highly competitive applicants to submit their secondary application. You should be ready to return any and all secondary applications within two weeks of the request to show your interest, keenness, and ability to manage time and fulfill demanded tasks.

It helps if you already have these new essays written or started. Keep false starts, alternative ideas, and cut paragraphs from your personal essay drafts. These could be used here. Keep working on these after you have turned in your primary applications. Your secondary application essays should not repeat previous material, although you can go into more depth on a topic introduced before. Some of you will have new events or things to add that happened after you put in your primary application. If explanations are needed at this point, again be positive and explain, don't make excuses.

Most secondary applications ask, "Is there anything else you want us to know?" You should always have something to say and add. If not asked elsewhere, you should speak to why their specific institution and program is of interest and/or a good fit for you. If you know this school is your first choice, be sure to say this. You should only add this if it is true; for most students, this may not become obvious until he or she has visited for interviews.

Each secondary application usually requires another fee. Again, waivers and reduction are available if you have met the need criteria used by AMCAS and for the MCAT.

If you decide not to pursue a school's application at this time, be sure to let the school and the HPA Director know. Don't simply forgo the submission of a secondary application.

The Medical School Interview and Visit

Once you are invited to one, the interview becomes perhaps the most important way a program will evaluate you as a person and decide if you have the qualities they expect in a future physician. Interview times are limited, and there are many more capable applicants than there are time slots allowed for interviews. When a school invites you, you are expected to go even if it does not allow time to find the best airfare or is at an inconvenient time. If you cannot make a time or wish to try for another time, you can ask once, politely. If a second time offer is much later than the first, it is not in your best interest to make this change simply for convenience or economy. Sometimes there are no other options.

The earliest interviews we've seen were scheduled for second week in August for early applicants. Most interviews stretch through the fall. A few programs will continue interviews through the winter, though if they have rolling admissions, these may only be for a wait list position.

Be prepared and know what to expect. Read from your various sources about interviews and check [Student Doctor Net](#) for an infinite list of questions asked at various places. (Warning: Student-Doctor-net has many hyper blog posters and may give extreme or unwarranted advice. I recommend it only as source of additional interview questions and how interview days are run at specific schools.) At minimum, you should be able to make eye contact and put your interviewer at ease. You should be able to clearly articulate why you want to go into medicine and how you are a good fit for the career and with their program. Further, you should be able to discuss and explain any application materials or content if asked, short of your confidential LOE's. Your research or service may be discussed. Often applicants are asked about some newsworthy topic, but this is difficult to prepare for in a meaningful way beyond knowing some topics.

To prepare, review your record. Be prepared to address questions regarding your GPA, science average, MCAT scores, and grades in specific courses. Be prepared to discuss what you will do if you are not admitted. The key to answering this question is to insist on how determined you are to continue trying, assuming this is true! Admissions Committees will question your determination if you immediately provide some alternative plan that would make you equally as happy, rather than insisting that you would continue to apply for medical school. Many interviewers ask this question. Other favorite questions have to do with medical ethics (including philosophical questions about your attitudes on abortion, euthanasia, etc.) or other topics of current interest. Remember, for many of these questions there is no "right" answer.

Be somewhat familiar with the medical school before the interview. Some applicants appear naive or uninformed about a school, and its surrounding community, to which they have applied to spend four years of their life. You should have some idea of the particular strengths of the school, such as special programs in teaching, opportunities for research, or innovative programs for their students. Maybe the teaching hospital opportunities are advantageous or the patients that are seen there. This information may be gained in a short conversation with a friend who is currently enrolled, or it may be obtained from the medical school catalogue or online. Be sure to glance at the medical school's teaching philosophy and specifically what type of physicians they hope to train.

Also be able to be somewhat conversant about the business side of healthcare (insurance – HMO's and PPO's, Medicare and Medicaid, and the current healthcare reform debate). They do ask about these issues sometimes to see if you are aware of what is going on in your chosen profession.

One thing medical schools are looking for during this process is whether you will be a contributing, dependable team member during your apprenticeship years as a medical student. Although you might plan to live a very isolated life or practice rural medicine, during your medical school years you will be part of various teams who will depend on your free communication and ability to work in a group.

Do practice interviews, or mock interviews. These should be arranged through [Career Services](#). These tips can include your wardrobe, makeup and hair as well as content. If you have an early application in May, you may want to schedule a mock interview before you leave in May, or schedule one for as soon as you return to Rhodes in August.

A good interview will determine what makes the applicant "tick," how well he/she relates to others, and how well-informed he/she is on current events, particularly regarding events which will have an impact on medicine and its practice. The practice of medicine demands that a person be articulate and have well-developed interpersonal skills. Most experienced interviewers try not to place unnecessary stress on an applicant during the interview, but on some occasions an interviewer will purposely ask questions or exhibit attitudes that seem designed to stress a student. Applicants must be prepared to answer some rather personal questions about their own background, beliefs, and experiences as well as some general moral and ethical questions. This is known as the "encounter session" format. It doesn't seem too common and may not always be intentional. A mature student will not become unduly flustered or antagonistic if subjected to a stressful situation, but will remain composed and continue to answer questions in a candid and straight-forward manner. Some schools now use formally trained interviewers and prescribed interviews. These may seem cool and less engaging. Don't worry. Instead assume this is the type of interview you are having if it isn't chatty and friendly. Connection to the individual interviewer isn't as important with these professionally trained interviewers. Applicants should be aware that they may very well obtain an excellent rating from a person who may speak in disagreement or seem unfriendly. They may also have a poor rating from the "friendly doctor" with whom they had such a pleasant visit.

If you want something revealed in your application but not discussed at an interview, an LOE writer can address it. These letters are confidential and not available or on the table for discussion during interviews. Please discuss this strategy with the HPA Director, as you may be best served by more openly discussing some topics and allowing their inclusion in the interview.

The actual interview is conducted in different formats at different medical schools. Most schools utilize a "one-on-one" personal interview with one to six different interviewers. Others use a "group interview." Personal interviews are often quite unstructured, lasting from less than 30 minutes to more than one hour. Many are like pleasant visits in which just about anything might be discussed.

Interview Wardrobe: Most interview advice sources will give tips on what to wear. They are usually too prescribed. Any office interview attire that shows you are serious and professional is more important than borrowing or buying an ill-fitting suit or one in which you are not comfortable. Extreme hair, piercings, and other style statements that would draw undue attention away from your professionalism are best left at home. This is really the point when it comes to appearance. Will a patient deal with you and respect you for your professional knowledge and manner, or will he/she first spend a few minutes thinking about your hair/piercing/etc? Most female alumni talk about the importance of wearing shoes in which you can walk and be comfortable for a long period. Break in those new shoes before your visit.

You are my First Choice.

If this is true of a single medical school, be sure to state this. This may be asked on an application or during an interview. If it isn't asked and you can truly say that a school is your first choice, be sure to send a letter stating this be added to your folder. Repeating this message if honest is also important. For some it may be already stated in the application, but when

writing a follow-up thank you to an interview one could say “and from everything I saw over my visit, Big-U continues to be my first choice for medical school.” I once talked to an admissions dean at a prestigious private school to ask why a much-deserving advisee was not accepted. Much like a jealous lover, the admissions dean told me that they had not heard lately that they were still the candidate’s first choice. This may be even more important when private schools know that you could spend less money going to your state school and wonder if you would accept their invitation to matriculate. They want to make up their class as early, easily, and securely, just as Rhodes does during its admissions process, to yield high-quality students and a high yield from offered acceptances. If you do not have a first choice, do not mislead a school by saying so.

Financing a Medical Education.

The AAMC has created a great Web resource to help with preparing your finances for medical school and funding medical school. These can be found at the [AAMC FIRST](#) site.

Medical schools recognize that most students will not be able to pay for their medical education completely from family financial resources. Every medical school has a Student Financial Aid Office that will assist accepted students to arrange a financial aid package if such help is needed. The majority of students currently enrolled in U.S. medical schools receive some form of financial aid. Aid is not awarded until a student has been accepted for admission, but it is not necessary or desirable to wait until for an acceptance to apply. An application for financial aid should be filed with the Student Financial Aid Office between January and April at most medical schools. Students applying after this time may find that most of the less expensive loan funds are committed. Even if you are waiting on an acceptance decision, talk with Financial Aid officers to make sure that you apply for aid on time.

Some students finance their medical education through service awards. These are commonly the Armed Forces Health Professions Scholarships and the National Health Service Corps (NHSC) Scholarships. There is also an Indian Health Services Scholarship available to Native Americans or Alaskan Natives. There are other state and local initiatives that trade financial assistance for medical services in rural and underserved communities.

Students accepted into the Armed Forces Health Professions program are commissioned as a second lieutenant or ensign in the inactive reserve of the U.S. Air Force, the U.S. Army, or the U.S. Navy. The scholarship pays all tuition, fees and books plus a living allowance. The student must serve on active duty during the summer, but is paid normal active duty rates as a commissioned officer for this time. An obligation of one year active service as a commissioned medical officer for each year of support is incurred, but recently a minimum three-year obligation was imposed. There are also some restrictions on the residency that the student may accept after graduation from medical school. Medical school graduates with a military service commitment are usually required to take their residency in a military hospital, and most residencies cannot last more than three years.

Students accepted into the National Health Service Corps similarly receive all tuition and fees as well as a living expense stipend. One year of service for each funded education year follows where the physician agrees to serve in underserved locations or with underserved populations.

Most medical schools have scholarships, fellowships, and grants available for talented students from their endowments or from special funds donated to the school by alumni, friends, private companies and philanthropic organizations. Such scholarships should be carefully investigated by students with strong academic credentials. Exceptional students have found that their own state institutions worked very hard to offer packages that kept them in their resident state. Sometimes non-resident state institutions offer packages to allow for in-state tuition. Texas out-of-state tuition may be less than some states' in-state tuition. There are only a few of these merit awards offered from most schools, but a number of awards may exist to encourage students from underrepresented groups and from disadvantaged backgrounds.

Acceptances and Multiple Acceptances

Accept the first school to offer you a position. You can then politely withdraw your acceptance if you are accepted by a school you would rather attend. Be sure to notify schools that you won't attend when you are accepted into a school you'd rather attend. Normally you should not keep more than one acceptance at a time. Remember to be polite and to free schools to make other offers. Some of these offers might be to your friends. Also, the schools that you politely decline now may be favored sites for residencies and fellowships later on. Some administrators will overlap with these programs and times, and they have long memories of some applicants. When you receive an acceptance, review your list of schools where you are active and release any schools that you rank beneath your currently held acceptance. Your email or note should thank them for their time and tell them that you have been accepted to xx where you will attend, or just that you are no longer pursuing your application at their institution. It will help them to speed their class make up and ease their work.

After receiving an acceptance you might want to ask new and different questions of the student affairs office or admissions office. At this time it is appropriate to ask about issues that will add quality to your life outside of class. Maybe you want to know about a religious community, GLBT groups, or access for disabilities.

Schools will require deposits by specific dates or in a set window of time. Be sure to make any deposits to hold your spot. If you are accepted somewhere else and you decline the prior acceptance, you will most likely be refunded this deposit in full or in some portion after informing your prior acceptances. Individual schools will define the rules of refunds, amounts, and relevant dates.

Remember, if you have multiple acceptances, you might want to consider any offered financial aid packages before making a decision, but don't collect acceptances just to collect them as it wastes everyone's time and may prevent a friend from receiving a timely acceptance.

Processing rules and dates differ by program and school schedule, so make sure you read your offers and follow directions. Dates for final decisions for matriculation and financial aid may

differ as well. Generally, schools will know if you are holding more than one acceptance after April 1st. At that time you **must** decide, as you can be dropped from a school later in May based on your failure to choose a single school.

Deferment of Acceptance. After normal acceptance, most schools will let applicants defer for a year and enter with the next year's class. Check your school's policies and procedures. Let schools know ASAP if you will be deferring attendance for a year. Most schools will let you defer for up to two years if you have been accepted into the Peace Corps or Teach for America. Fewer schools will allow deferment if you were accepted off of a wait list. A few schools will let you defer in order to apply to a preferred school in the next cycle. Whatever your plans or desires for deferment, you must conduct open and honest discussions with the admissions office.

If Accepted, Please read the sections at the end of this handbook.

Wait Lists or Alternate Lists

If you are on a wait list or listed as an alternate, you should let the schools know that you are still interested in attending their school. Some admissions directors will tell you generally whether you are in the top, middle or bottom third. A rare few will give you specific rankings. Some schools will tell you how far down a ranking or section they accepted last cycle. Some schools will have fixed the list at the time you were put on it or by a certain date. For these schools, no additional information will be considered. Nevertheless, you should drop them a note and repeat every few months that you are still interested in their program. Some schools reconsider students' placements on the list when they go to the list to admit someone. For those schools, if you have new things to add (i.e., fall semester's grades or an additional experience), you occasionally will want to add these updates to your file.

Schools will make up their class from the wait list right up to orientation. We have had some 9-14 students each year get their first acceptance after May 15 off of a wait list. We've learned of acceptances as late as July 23. This means that those not accepted off a wait list would have been best served by putting in a new early application for the next cycle in May or June, while still on a current cycle's wait list.

Later in the cycle, you are best served by regularly repeating your interest in a given program.

Reapplication in the next cycle

If you plan to reapply, you must keep working toward becoming a more prepared and competent applicant. You should make preparations and apply for the next cycle even though you may still be on a wait list during a current cycle.

Admissions personnel will be looking for something new. You will need to discuss something you've done in terms of GPA, MCAT, or experience enhancement that shows why they should reconsider your application after already considering it and making a negative decision. This may not seem fair as if you were simply late or sloppy before; why would you need to improve your stats?

One way to look at this is that applicants with a true commitment and work ethic will not have sat pat and let a GPA decline or stopped their clinical experience or community service. After March first, most directors of admissions will talk candidly about how you might continue to become more competitive in a future application in regards to your GPA, MCAT, experience, sometimes essay, and interviews, but never LOEs. You must have this conversation with the HPA Director as well.

If you had a just acceptable MCAT, even though it was in the acceptable range, admissions committee members might want to see you improve. For some with a low undergraduate GPA or a weak start, it may just take additional courses. For graduates, if they can fit it in around work, taking a course such as biochemistry or histology will show the desire to make the first year of medical school easier and his or her ability to succeed in such upper level courses. For those who did not have as much or as committed clinical experience, adding to that experience now will help. Some might want to take a job in the healthcare industry to both earn money and gain experience.

For those who really did not have the basic MCAT score or GPA that schools are looking for, a post-baccalaureate (PB) or master's program may be a good move. There are hundreds of these, and they are each designed for different clientele. Some are designed for people changing careers. Some only accept students with already close to competitive MCAT scores, so just taking the MCAT again with different or more study may be necessary instead of a PB program. Some programs only accept students who have applied and failed to be admitted to medical school. Others will not accept students who have already applied. Some allow a student to obtain healthcare experience that may not have been possible at their prior institution. Some of these programs allow you to take first-year medical school classes with medical students and feed some proportion of their better graduates into their associated medical school. Some are best for students who had not decided to go to medical school at the start of their undergraduate schooling and thus still need undergraduate sciences or a repeat of undergraduate sciences where they received C's. These programs can offer undergraduate certificates or graduate masters degrees. Financial aid for these programs differs by program and applicant. Some of the masters programs allow for a career if medical school isn't likely after the program.

Remember, most of these programs are income earners for the institution. In many cases, taking some courses, studying for the MCAT or gaining additional experience are equally useful. Nonetheless, these programs, especially those that feed to a DO or MD school, have been very beneficial for some students.

If you are interested in any of these programs, talk with the HPA Director about your specific circumstances, and see the AAMC site with these programs as linked from our online "Useful URL's for Premeds" page of links.

We continue to work with alumni for their health profession applications. In some cases this may be advisory and another institution may actually gather letters.

Gap or Glide Years

If you are applying as a senior, you will have a year between your time at Rhodes and the beginning of your time in medical school. This is a common occurrence; it is now true of most matriculates to medical schools. For reapplications, read the comments above about continuing your experience and demonstrating your commitment.

Your undergraduate loans may come due after six months. If you are accepted for medical school in the next fall, you will be able to delay repayment again. Because of this window, some loan officers may allow you to wait until the decision is made before starting repayment. It is not a fixed rule or offer. If you want this option, ask your loan officer if it is possible.

Applying after Several Years Out

The average age of students entering medical schools is 24-25. Admission committee members frequently have told us how it is nice to talk with students who bring more life experience to the table as an older applicant. We continue to work with alumni and are available to help whenever you decide to apply.

If Accepted, Your M1 years and beyond

You'll be working very hard your first year. Don't worry about how bad or how good it may feel until after you've gotten through the first term. You may feel day to day less satisfied with your progress than you were at Rhodes. Keep plugging away, working hard, and work with study groups and tools whenever possible.

All Doctors Please Keep in Touch with Us

Rhodes wants to keep in touch with all alumni/ae, but if you are accepted to a medical school, please keep in touch with the Director of HPA as well as our alumni office. Be sure to come to our HPA reunion events on the Friday of Homecoming weekend to meet your old friends and to offer advice and answers to our future students. Please keep your emails updated as you move through your training and jobs. We want to be able to ask for your help with questions from future students looking toward a medical career. We hope you remember how important your healthcare experience was and that you offer future Rhodes students shadow and internship experiences, no matter where you are.