

REQUEST FOR A LETTER

Name: _____ Date of request: _____

Email: _____

Date you would like the letter completed: _____

(please allow 7-10 days for a standard letter of recommendation. Take this time frame into account when indicating a deadline date. If you are mailing the letter yourself, the date you give us may be earlier than the actual deadline date for receipt of letter.)

Please indicate:

Pick up letter (phone/pager #: _____) Fax letter to: _____

Mail letter to:

Please check *what type* of letter you are requesting:

LETTER OF RECOMMENDATION from _____ (see back of this sheet) [DL]

MSPE/MEDICAL STUDENT PERFORMANCE EVALUATION (Dean's Letter) [CS]

(Please provide the name or program address to be mailed to—students may not receive copies of the MSPE.)

Letter of GOOD STANDING [CT]

MEDICAL CENTER ID [CG or CT]

TEST SCORES: [CS]

MCAT _____ copies

Boards Part I _____ copies

Boards Part II _____ copies

Please indicate the institution and address where this information should be sent:

JURY DUTY pardon request (attach summons) [CG or CT]

AWAY ELECTIVE (i.e. a letter certifying that you are a student in good standing; will be paying tuition while participating in the elective; are covered by the University's health insurance plan; have malpractice coverage; and will receive credit for this work) [CT]

HIPAA VERIFICATION [CT]

COMPLETION OF REQUIREMENTS verification letter (Pending receipt of MD Degree and Graduation) [CT]

For LETTER OF RECOMMENDATION, please see reverse side.

For LETTERS OF RECOMMENDATION:

What are you applying for?

To whom should the letter be addressed?

Provide any information relevant to this particular request.

1. **Attach a CV.**
2. List all honors and awards given subsequent to your AMCAS application.
3. List all research experience subsequent to your AMCAS application.
4. List all publications, abstracts, and presentations.
5. List electives taken in the first/second year of medical school.
6. Describe any summer research performed following your first year in medical school.
7. Describe any patient care activities in which you have been involved.
8. Describe any student activities in which you have been involved.