Oregon State University

College of Science
Premed-committee@oregonstate.edu

Pre-medical Information Sheet for Re-applicants

This information will be treated confidentially.

Name: _____ Date: _____

Home Address: _____

_____

Phone: _____

E-mail: _____

We would like the following information for your premedical file so that we can write an informed, updated letter on your behalf.

1. What have you been doing since you graduated from OSU? (If you have been taking classes, please provide a copy of your transcript).

2. Are you planning (or did you) retake the MCAT? If yes, what date? _____
   How will you (did you) prepare for it (e.g. self-study, Kaplan course, other prep course, etc)?
   What is your new score (if known)?

3. Did you receive advice from any of the medical schools regarding specific ways to improve your application this time? If yes, please describe.

4. Why do you think you are a better candidate for admission this year?