**Please submit a new copy of this form to** **premed\_predental@uconn.edu** **each time you have updates to provide following a previous application cycle or would like to provide mid-cycle updates.** We will save multiple iterations of this form to your file by date submitted to ensure that we capture all relevant information. **Please use a blank version of this form each time you submit it so that we can easily see at a glance what is new. Questions for which you have NO update to provide should be left BLANK.**

Please know while we will make every effort to review applicant portal and composite update submissions as soon as possible, the materials you submit may not be reviewed immediately upon receipt. Please note that all University employees are mandated reporters of child abuse or child neglect. In addition, UConn employees have responsibilities to report to the Office of Institutional Equity student disclosures of sexual assault and related interpersonal violence; any information you submit on your applicant portal or composite updates forms is subject to UConn reporting policies. If you feel like you need more immediate assistance or support, we encourage you to reach out to the Dean of Students Office and/or Student Health and Wellness- Mental Health. In addition, if you have concerns related to sexual harassment, sexual assault, intimate partner violence and/or stalking, we encourage you to review the resources and reporting options available at: [https://titleix.uconn.edu](https://nam10.safelinks.protection.outlook.com/?url=https%3A%2F%2Ftitleix.uconn.edu%2F&data=02%7C01%7Ckrista.rogers%40uconn.edu%7C0b6bbeb437e347657a5b08d80964ed22%7C17f1a87e2a254eaab9df9d439034b080%7C0%7C0%7C637269676370642930&sdata=IECk1m17g2%2Bs9e1iCbp5lx3xqe8xPflH1D08zdf2zzM%3D&reserved=0)/

#  I. BASIC INFORMATION

## Date:

Name:

UConn email address:
*We will use this address to correspond with you throughout the cycle.*

Phone number:
*We will use this number if we need to contact you about something urgently.*

Applicant status:

*The follow questions are critical to answer accurately to ensure we transfer any and all composite letter materials for you from previous cycles to the current cycle in our internal records.*

1. Are you a ***first-time applicant*** (i.e. you have never previously submitted an application to health professional school before)?
 Yes / No
2. Are you a ***reapplicant***? If so, please underline **ALL** previous cycles for which we submitted a composite letter for you:

2011 / 2012 / 2013 / 2014 / 2015 / 2016 / 2017 / 2018 / 2019 / 2020

1. Are you a ***previous cycle deferral***? If so, please underline **ALL** previous cycles for which we worked with you to prepare for a composite letter.

 2011 / 2012 / 2013 / 2014 / 2015 / 2016 / 2017 / 2018 / 2019 / 2020

#  II. PORTAL UPDATES

*Use this space to provide brief updates or additional information that was NOT entered in the first submission of your portal to complement your previous responses. Do* ***NOT*** *copy over your previous portal responses within your answers—this makes it hard for us to see what is new at a glance. If you would like to completely rework your response for any particular question, please underline "starting from scratch” next to the relevant question. We will then ignore the original response saved within your portal and only refer to the new response below.*

1. **Student Registration:** Please underline all school types.

 MD / DO / Dental / PA / Texas / Optometry / Podiatry / Other (specify):

1. **Competency-Based Admissions:** Please list any categories for which you would like to tweak your original answer along with the new numerical rating.

**3. HPED:** Please list any categories for which you would like to tweak your original answer, along with the new rating.

### Questions

1. *Provide personal information about yourself (place of birth, parents' occupations), your notable achievements in high school (not college), and information regarding any healthcare-related careers in your family.* (starting from scratch)
2. *List your extracurricular activities in general and those related to community service. Include your time commitment as well as if you had any leadership roles. Include only those activities for which you have demonstrated a sustained interest.* (starting from scratch)
3. *List any healthcare-related shadowing and/or direct patient care experiences you have had.* (starting from scratch)
4. *What is your motivation for becoming a healthcare practitioner? Specify the influence of others along your path toward a healthcare career.* (starting from scratch)
5. *What is/are your major(s) and minor(s) and what influenced your decisions? Is there anything unusual about these choices?* (starting from scratch)
6. *Have you been involved in research? If you have, please report the type of project (clinical or basic research), whose lab the work was done in, the title of your project, your time commitment, if the work was included in a publication/presented at a meeting, and if you received credit as an author.* (starting from scratch)

1. *List anything about yourself that you feel sets you apart from other candidates. E.g., your age when applying, you are the first person in your family to go to college, your choice of major, you are multilingual, your significant volunteering experiences, etc.* (starting from scratch)

1. *List your work experience. If you worked while attending school, note the average number of hours per week you worked.* (starting from scratch)
2. *To which specific health professional schools are you considering applying to?* (starting from scratch)

 .

1. *Do you have any disciplinary history? Provide details, if any.* (starting from scratch)

1. **Exams:** Please add any new scores directly to the portal "Exams" page. This page does not lock.

Also list any upcoming sittings of the MCAT here (MM/DD/20):

1. **Resume:** Please add your most recent resume/CV to the "V. Supplements” section of this form.
2. **Course Grades:** Please add any new grades directly to the portal "Course Grades" page. This page does not lock. If you have new transcripts from a graduate program, etc. please add to the "V. Supplements” section of this form.
3. **IDs:** Please add any new IDs directly to the portal "IDs" page. This page does not lock.

Note: If applying to MD programs, please confirm your

2021 AMCAS Letter ID here (7-digit number;
not available until the primary application opens in May):

1. **References:** Please specify the LOR that you would like to be included within your 2021 cycle composite letter below. We will remove any existing LOR that are not listed below from your composite template. Note: New LOR and updated versions of previously received LOR should be requested newly on your portal "References" page. This page does not lock. **It is your responsibility to mark entries for any previously received LOR that you no longer want included as "Inactive" on your portal "References" page. In addition, check the box when ALL of your expected LOR are received.**

### Completely new LOR:

1.

2.

3.

4.

5.

### Updated versions of previously received LOR:

1.

2.

3.

4.

5.

### Previously received LOR (use as is):

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

#  III. OPTIONAL COMPOSITE UPDATES INTERVIEW

Applicants other than pre-dental applicants may request a one-part composites update interview if they wish. Please list **ALL** of your availability below.

* 1. **Advisor preference**, if any (underline): Dr. Arlene Albert / Dr. Keat Sanford
	2. **Availability** (Monday-Thursday, 10-5pm EST):
	3. **Appointment type preference** (underline): in-person / phone / Skype—username:

#  IV. ADDITIONAL COMMENTS

*Use this space to provide any additional comments you may have.* .

#  V. SUPPLEMENTS

*Copy & paste or attach any additional forms such as resumes or transcripts into this section.*