

HPAB APPLICANT INFORMATION & RESPONSIBILITIES

Career Services Copy

Name: _____ Penn ID: _____

Are you applying this year? _____ Have you opened a Credentials File? _____

E-mail Address: _____ Phone: _____

Graduation Year: _____ To what program(s) are you applying? MD MD/PhD DO Dental
(please check all that apply)

Responsibilities for Penn Students and Alumni Requesting HPAB Letters for 2023-2024 Admission:

- 1) Attend the mandatory HPAB Applicant Workshop.
- 2) Meet with your pre-health advisor for a 45-minute Advisor Interview. Schedule this appointment immediately following the Applicant Workshop and upload the following in the Applicant Management System (AMS):
 - Photo
 - HPAB Essays
 - BCPM GPA
 - Expanded Résumé
- 3) Sign and submit the Health Professions Advisory Board Notice and Waiver Form.
- 4) Ask for letters of recommendation and make sure that a minimum of 3 appropriate recommendations reach your Credentials File by **May 13**.
- 5) Submit your List of Recommenders Form (designating 3-6 letters of recommendation in your file) by **May 20**.
- 6) Submit a Credentials Request Form and payment online through the AMS starting at **noon EST** on **July 18**.

I certify that I have read and understand the statement of responsibilities for registrants applying to medical schools. I agree to abide by the policies set forth in this manual and in the Applicants' Workshop and understand and accept my obligations with regard to the medical school application process.

Signature: _____ Date: _____

FOR CAREER SERVICES USE ONLY

A.I. Date: _____ Advisor: _____