



Central Application Service for  
Physician Assistants

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Application Instructions  
2013-2014

CASPA

PO Box 9108

Watertown, MA 02471

617.612.2080

[www.caspaonline.org](http://www.caspaonline.org)

## CASPA CONTACT INFORMATION

Arrange for your CASPA materials to be sent to the address below:

### CASPA

PO Box 9108

Watertown, MA 02471

[caspainfo@caspaonline.org](mailto:caspainfo@caspaonline.org)

617.612.2080

Follow CASPA on Facebook

[www.facebook.com/CASPAOnlineApp](http://www.facebook.com/CASPAOnlineApp)

For answers to common questions, review the [Before Applying](#) and [Instructions and FAQ](#) (Frequently Asked Questions) section on the CASPA Portal. Please note that even after you e-submit your completed CASPA application, it is your responsibility to login frequently and check the status of your materials.

## OVERVIEW

In an effort to simplify the application process for prospective Physician Assistant (PA) students and to facilitate the admissions process for PA educational institutions, PAEA launched the Central Application Service for Physician Assistants (CASPA) in 2001. CASPA allows PA applicants to use a single Web-based application and one set of materials to apply to multiple PA programs. CASPA is a service of the Physician Assistant Education Association (PAEA) and is administered by Liaison International, an education information technology company located in Watertown, Massachusetts.

Applicants who apply through CASPA submit a completed web-based application comprised of the following:

- Biographical data
- Colleges and Universities attended
- Academic course history
- Health care experience
- References
- Standardized test scores
- Volunteer experiences
- Awards and Honors
- Professional certifications
- Personal statement

It is the applicant's responsibility to read and follow all **CASPA** and **program specific** instructions.

### **2013-2014 Application Cycle**

The 2013-2014 admissions cycle begins on April 17, 2013. Applicants may start and submit the CASPA application as soon as it is available. The final deadline to submit a CASPA application for the 2013-2014 CASPA application cycle is March 1, 2014.

### **Program Eligibility**

All physician assistant (PA) educational institutions recognized by the Accreditation Review Commission on Education for the Physician Assistant, Inc (ARC-PA) with accredited or provisional status are invited to participate in CASPA, as well as programs that are within one year of their provisional accreditation being granted. Institutions that participate in CASPA agree to accept application for admissions through the CASPA service.

### **Role of CASPA**

The purpose of CASPA is to facilitate the PA admissions process for applicants and programs, promote the physician assistant profession, expose PA educational programs to a broad spectrum of applicants, and provide applicant data for institutional, regional, and national analysis. *CASPA is not responsible for determining admissions eligibility, nor whether an applicant meets the PA program admissions requirements.*

### **CASPA Processing Overview**

CASPA will consider an application complete and ready for transcript verification once the following items are complete and marked as received by CASPA:

- CASPA application has been e-submitted
- Official transcripts from all U.S. and English-speaking Canadian institutions attended
- At least two of the three required letters of recommendation (LOR)
- Correct CASPA application fee

CASPA will accept up to three (3) letters of recommendation per applicant, but will process a complete application with only two (2) letters of recommendation completed. Once the third LOR is submitted, CASPA will forward it to all programs to which the applicant has applied. Individual programs may not consider applicants who are incomplete based on their specific admissions requirements (*i.e. programs may not review an application until the third LOR is received, although CASPA will verify a complete application with only two LORs submitted*).

### **Verification**

Once an application is considered complete by CASPA, the Service will compare original transcripts to the self-reported course information on the application to verify accuracy, calculate [CASPA GPAs](#), and submit the verified application file to the applicant's designated PA programs. *CASPA processing may take up to four weeks from the date CASPA considers your application "complete."*

### **File Shipment to PA Programs**

CASPA will begin to forward verified applications to PA programs on June 7, 2013. CASPA will provide newly completed and revised application files to programs for download on a weekly basis during the cycle.

**Role of PA Programs**

Programs determine whether an applicant is eligible for admission and will notify applicants directly regarding all admissions decisions. PA programs will contact applicants once the application is received, per their individual policy. Programs reserve the right not to take all CASPA application fields into consideration in the admissions process. *Admission policies and prerequisites vary significantly by program; please visit the program's website to determine if you meet their prerequisite requirements prior to applying.*

**Supplemental Materials**

PA programs may also require applicants to send additional materials directly to the institution, known as supplemental materials. PA programs may not consider an applicant's file or offer acceptance until all required materials are received. Supplemental materials *may* include additional application questions or essays, **paper copies** of official GRE scores, other official test scores, original foreign transcripts, or other items. Failure to submit all required materials by the program's deadline may jeopardize an applicant's eligibility for admission consideration.

## APPLICANT RESPONSIBILITIES

CASPA applicants to physician assistant programs agree to abide by certain rules and requirements.



### Professional Behavior

PA applicants are expected to act professionally in all of their dealings with CASPA and the physician assistant educational institutions. Applicants are expected to properly follow instructions and meet deadlines.

Responsibility, respect, good judgment and cooperation are qualities valued by the PA profession; applicants are expected to demonstrate these qualities beginning with the application process.

### Applicants using CASPA agree to:

- Be responsible for researching the application procedures, admission requirements and deadline requirements for each designated physician assistant program and adhering to those requirements.
- Complete and e-submit their CASPA application, sign the CASPA Release to Programs statement and submit all supporting documentation to CASPA at least four weeks prior to the earliest deadline of the programs to which they are applying.
- Use the Transcript Request Form (available to applicants on the CASPA portal, [www.caspaonline.org](http://www.caspaonline.org) after they have listed their institutions attended) to submit transcripts to CASPA. To allow for timely processing, it is recommended that transcripts arrive at CASPA at least four weeks prior to the deadline of the earliest program to which the applicant is applying.
- Use the CASPA Payment Form (available during the e-submit process) to submit money order fee payments to CASPA (credit card payments preferred) and agree to submit the correct CASPA application fee.
- Provide honest, accurate and complete application information.
- Report to CASPA any changes in contact information (mailing address, email, phone number) throughout the admissions cycle. It is recommended applicants provide the same updates directly to the programs to which they have applied.
- Monitor their application's status and the submission and receipt of all application materials to CASPA, including all transcripts and letters of recommendation. The status of the application and supporting documents can be monitored throughout the application process within the applicant portal.
- Follow up on any incomplete application statuses and/or missing materials, such as transcripts, letters of recommendation or payments, with CASPA staff and facilitate the submission or re-submission of those materials to CASPA. If letters of recommendation are missing, the applicant should contact the individual reference to make sure the request was received and encourage timely submission. Please note that CASPA is not responsible for documents which are lost in the mail. These items must be re-submitted to CASPA in a timely manner.
- **Respond immediately** to ALL notices and questions received from CASPA staff and physician assistant programs. Applicants are responsible for checking their CASPA application inbox available on the applicant portal, as well as their personal email and voicemail for these important notices and questions.
- Print a hard copy of the completed CASPA application to save for their files.
- Communicate and initiate all contact in a professional manner when interacting with CASPA staff and admissions staff of designated programs. CASPA will not communicate with parents, spouses, friends and or other individuals in regards to an application.
- Accept or decline all interview invitations and offers of acceptance in a timely and considerate manner.
- **Log off** the CASPA web application after the completion of each entry or review session to protect against unauthorized access of application information.

## CASPA APPLICANT CHECKLIST

This checklist is intended to help you prepare your application, but is not intended to replace the application instructions. You must meet all minimum requirements to apply to a PA program. CASPA does not issue refunds under any circumstance.

[www.caspaonline.org](http://www.caspaonline.org)

- Read the [Before Applying](#) and [Instructions and FAQ](#) sections of the CASPA portal
- Create a CASPA application login account
- Complete all the application sections below in their entirety:
  - Applicant Information
    - Complete the Contact Information section
    - Complete Personal Data section
  - Additional Information
    - Complete the Additional Information section
    - Complete the Health Related Training section
    - Complete the Narrative section
    - Complete the Work and Volunteer Experience section
  - Academic History
    - Complete the Tests section (see options below)
      - My program(s) require the [GRE](#)
      - My program(s) have a [GRE Code](#)
      - Choose your program(s) GRE codes on the ETS website for official scores to be reported directly into CASPA (if applicable)
      - My program(s) require the [TOEFL](#)
      - Send official paper TOEFL scores to CASPA
      - My program(s) requires other tests (if applicable):
  - Institutions attended section
  - Coursework section
    - Request all official transcripts (U.S. and English Canadian) to be sent to CASPA
    - After verification, update coursework if applicable (Academic Update)
    - [Foreign or French Canadian Transcripts](#) have been evaluated (if applicable)
    - Send original foreign transcript evaluation to CASPA (if applicable)
  - Reference Forms section
  - My Programs section – before selecting your designations, see below:
    - I have visited my program(s) website to review specific admissions requirements
    - I have visited my program(s) website to review supplemental application requirements
    - I have researched all program deadline requirements and determined I am submitting in time
  - Review application for accuracy. *\*Changes cannot be made once you e-submit your application*
  - Select all of the correct program designation(s)
  - E-submit your application. *\*Do not wait for CASPA to receive all of your materials before you e-submit you application*
  - Pay the applicable fees related to your application designation(s)
    - Paid by credit card
    - Paid by money order
  - Print a hard copy for your records

Refunds are not given for any reason. Do not apply to a program unless you meet its admission requirements.

## GENERAL INSTRUCTIONS

### Equal Opportunity Statement

The Central Application Service for Physician Assistants (CASPA) and the Physician Assistant Education Association (PAEA) value diversity and comply with all applicable local, state and federal laws related to equal opportunity and non-discrimination. As such, they do not discriminate on the basis of race, ethnicity, national origin, sex, age, religion, creed, disability, sexual orientation, or veteran status in any of their policies, practices or procedures.

### Physician Assistant Technical Standards and Essential Functions

Neither PAEA nor CASPA have adopted any policies or positions regarding the essential skills or technical standards necessary to practice or function as a physician assistant. However, individual PA programs generally do have these types of policies in place. A program's technical standards and/or essential skills may describe the physical, behavioral, and/or cognitive abilities needed to complete the physician assistant curriculum at that particular institution and to competently perform as a physician assistant upon graduation. Contact your designated PA programs directly regarding program-specific policies.

## ACCOUNT INFORMATION

\*indicates required information

### Title

Enter the following:

- Dr.
- Ms
- Miss
- Mr.
- Mrs.
- Rev.
- Other appropriate title

### \*Last Name, \*First Name, Middle Name

Enter your full legal name. Do not use nicknames or parentheses to note alternate names in this section.

### Suffix

(i.e. Jr., III) Leave blank if not applicable.

### Prior/Alternate/Maiden Last Name

If you had a different last name under which transcripts may be received, enter the alternate name.

### \*Email Address

Use this item to provide the email address where you can receive messages reliably. (*CASPA discourages using .edu email addresses*). Check your messages frequently. If your email address changes, login to your CASPA account and edit your contact information online. After DATE, contact the PA programs directly to change your email address. CASPA may use a bulk email process to contact you. Some email providers use

filters to prevent users from receiving “spam” email. Email filters may interpret a message from CASPA as “spam” and automatically delete it. To avoid missing important CASPA emails, turn email filters off during the admissions cycle and check your spam folder for CASPA messages. See also “Alternate Email Address.”

**Confirm Email Address\***

Re-enter your email address.

**\*Security Question**

Select one of the security questions to be asked when using the “Forgot Password feature.

**\*Security Answer**

Enter the answer to your previously selected Security Question.

**\*Username**

Choose a username that is between 6 and 15 characters long.

**\*Password**

Choose a password that is between 5 and 10 characters long. Select a password that will be difficult for someone else to guess.

**\*Confirm Password**

Re-enter your password.

**RE-APPLICANTS**

If your application was “mailed” to your designated PA programs in the previous admissions cycle and you re-apply, CASPA can pull your application materials forward into the current admissions cycle. It is the re-applicant’s responsibility to verify that the imported information is accurate and complete.

**Creating a Re-Applicant Account**

On the CASPA Application login page, click the “Re-Applicant” link. You will need both your username and password from your account in the previous cycle or access to the email address associated with your account from the previous cycle. If entering your username and password from the previous cycle, once entered correctly, you will be taken to the account creation page where you will need to create a new account for this admissions cycle, which will be pre-populated with the information pulled forward by CASPA.

If you are entering the email address associated with your account from the previous cycle, your unique re-applicant code will be sent to that email address. Once you have received this code, it is valid for 24 hours and must be used in that timeframe. To enter the code on the application, click the “Re-Applicant” link on the CASPA Application login page, then click the link that says “Have a Re-Applicant Code? Click here” on the following page. Enter the code exactly as it was sent to you. Once the re-applicant code has been entered, you will be taken to the account creation page where you will need to create a new account for this admissions cycle, which will be pre-populated with the information pulled forward by CASPA.

### **Items Pulled Forward**

CASPA will pull most application data forward, including all colleges and universities attended and ~~U.S.~~ courses previously verified by staff.

### **Items NOT Pulled Forward**

**The following items are not pulled forward by CASPA from the previous cycle:**

- Letters of Recommendation
- Narratives
- Payments
- Unverified Coursework (including all planned/in-progress-coursework and courses entered as an Academic Update)
- Transcripts containing updated coursework
- PA Program Designations

In addition, there are fields on the CASPA application which have changed or been added since last cycle which will NOT be filled in by the import. Applicants will have to go over ALL sections of the application and ensure these new sections are filled in, as it will not necessarily be readily apparent from your application checklist that something is missing if the field is not required.

### **Update Your Application**

The current CASPA application differs slightly from the one in the previous cycle. Review every item in every section of the application. It may not be apparent from the main checklist screen that a particular item is incomplete or missing.

Re-Applicants must do the following:

- Enter new colleges and universities attended
- Add a second instance of a previously listed college or university, if new coursework has been completed since submitting the application during the previous admissions cycle
- Submit U.S. transcripts from each institution where additional coursework was completed
- Enter all newly completed courses, as well as any known, planned and in-progress coursework
- Add new, relevant activities and accomplishments
- Review every item in application to ensure file is complete and accurate
- Enter new references
- Compose a new narrative essay

If required by designated PA programs, re-applicants must also:

- Submit new GRE scores
- Enter and (re)submit health care hours
- Submit Canadian transcripts for newly complete coursework
- Submit foreign transcript evaluations for new international coursework completed
- Submit new TOEFL scores

- Submit new supplemental materials and/or fee directly to programs

### **APPLICANT INFORMATION**

If your contact information changes, you must login to your CASPA account to update your file. After the specified date on the applicant portal, notify your designated PA programs directly with changes to your contact information.

### **CONTACT INFORMATION**

**Check if you have materials under another name:**

Check this if you have any materials, including transcripts, under any other name

**If so, indicate name:**

If box is checked, please indicate name previously used

**Nickname:**

If you are known by a nickname, enter it here if you wish. This field is not required.

### **PREFERRED MAILING ADDRESS**

**\*Street 1:**

Enter a street address in which you are able to receive mail from CASPA or designated programs reliably.

**Street 2:**

Enter any other numbers associated with your street address here (apt., condo, duplex, etc). This field is not required.

**\*City:**

Enter your city name

**\*State:**

Select your state of residence from the drop down menu

**\*Zip Code:**

Enter your zip code

**\*Country:**

Select your country of residence from the drop down menu

**\*Home Phone:**

Enter your primary contact phone number. If this is your cell phone, please enter your cell phone number

**Work Phone:**

Enter your work contact phone number. This field is not required.

**Mobile Phone:**

Enter your mobile phone number. This field is not required and you may put your mobile phone number in the Home Phone field.

**PERMANENT ADDRESS**

**Check if Permanent Address is the Same as the Preferred Mailing Address:**

Check this box if the Preferred Address you entered above is the same as your permanent address.

*If you do not check this box, enter your permanent address below. You will not be able to continue unless all required fields are complete.*

Click Save.

**PERSONAL DATA**

**\*What is your Country of Citizenship?:**

Select your citizenship status from the drop down menu

**Do you hold a Visa?:**

Check this box if you hold a visa. This field is not required.

**If you hold a Visa, please specify:**

Select Visa type from the drop down menu

**Physician Assistant students interact with patients from many backgrounds. Indicate any language(s) other than English in which you feel comfortable conversing:**

Enter any languages in which you are fluent. This field is not required.

**\*In what state do you claim residency?:**

Select your state of residence from the drop down menu

**\*In what county do you claim residency?:**

Select your county of residence from the drop down menu

**\*Gender:**

Select Male, Female, or Do Not Wish to Report

**\*Date of Birth:**

Enter your date of birth. Use MM/DD/YYYY format

**\*State of Birth:**

Select your state of birth from the drop down menu

**\*County of Birth:**

Select your county of birth from the drop down menu

**\*Country of Birth:**

Select your country of birth from the drop down menu

**\*Secondary School (High School) Name:**

Enter the name of your secondary school (high school) name

**\*Secondary Schools State:**

Enter the state where your secondary school is located

**\*Year of Graduation:**

Select your year of graduation from your secondary school from the drop down menu

**DEMOGRAPHIC INFORMATION**

**ETHNICITY, RACE and BACKGROUND**

Physician Assistant programs fully recognize the importance of diversity in their student body and in the physician assistant work force. Accordingly, programs strongly encourage applications from persons from all socioeconomic, racial, ethnic, religious, and educational backgrounds, and persons from groups underrepresented in health care.

**Do you consider yourself to be of Hispanic origin?:**

*If yes*, check the “Yes, Spanish/Hispanic/Latino/Latina box. This field is not required.  
Check all boxes below that apply to you.

*If no*, check “No, not Spanish/Hispanic/Latino/Latina box. This field is not required.

**Which of the following best describe your race? Please mark one or more races.**

Check all boxes that apply to you. This field is not required.

**Check if any of the following apply to you:**

Check all boxes that apply to you. This field is not required.

**\*\*By designating any of the above items, you are considered to have met the criteria for educationally/environmentally disadvantaged as defined by the above guidelines.**

To determine if you come from an economically disadvantaged background, you are asked to compare your parental family’s size of household (number of exemptions listed on parent’s Federal 1040 income tax forms) and adjusted gross income against the chart provided in the link below. The chart is based on 200 percent of Federal low-income poverty guidelines. You should use your parent’s 2012 forms regardless of age. Please visit the [U.S. Department of Health and Human Services](#) website for poverty guidelines.

**Your parent’s family income falls within the table’s guidelines and you are considered to have met the criteria for economically disadvantaged. Please check, if you agree:**

Check the box if this statement applies to you. This field is not required.

**What is the type of geographic area where you were raised?:**

Select your geographic area from the drop down menu. This field is not required.

**CERTIFICATIONS**

**\*Highest Degree Earned to Date:**

Select highest degree earned to date from the drop down menu

**Check if you have any professional certifications:**

Check the box if you have any professional certifications. This field is not required.

**Check if you have any professional registrations:**

Check the box if you have any professional registrations. This field is not required.

**ORGANIZATION 1 & 2**

**Type of Certification/Registration:**

Enter the certification/registration type. This field is not required.

**Date:**

Enter date. Use MM/DD/YYYY format. This field is not required.

**Certifying/Registering Organization:**

Enter the certifying/registering organization. This field is not required.

**Click Save.**

**ADDITIONAL INFORMATION**

**ADDITIONAL INFORMATION**

**\*Have you ever matriculated in or attended any PA education program?:**

Select Yes or No

**\*Have you ever been disciplined for academic performance or conduct violations (ie. Academic probation, dismissal, suspension, disqualification, etc) by any college or school?:**

Select Yes or No

**\*Have you ever been convicted of a misdemeanor?:**

Select Yes or No. *\*Most PA programs require background checks as a condition of acceptance pending satisfactory results. Failure to disclose prior convictions may have serious consequences, such as annulment of acceptance offers or program dismissal. Select "Yes" in the appropriate box if you have been convicted of a misdemeanor, and provide a brief explanation in the space provided. Please note that in some states, common traffic violations may be considered misdemeanors. Select "No" in the appropriate box if you have no convictions.*

**\*Have you ever been convicted of a felony?:**

Select Yes or No. *\*Most PA programs require background checks as a condition of acceptance pending satisfactory results. Failure to disclose prior convictions may have serious consequences, such as annulment of*

acceptance offers or program dismissal. Select "Yes" in the appropriate box if you have been convicted of a felony, and provide a brief explanation in the space provided. Select "No" in the appropriate box if you have no convictions.

**\*Have you ever had any certification, registration, license or clinical privileges revoked, suspended or in any way restricted by an institution, state, or locality?:**

Select Yes or No

**If you answered Yes to any of the 5 previous questions, please provide a brief explanation:**

Please provide a brief explanation for all questions you answer Yes for. If you did not answer Yes, this field is not required.

**\*Have you had any US military experience?:**

Select Yes, No or Currently Serving

**AUTHORIZATION: Check to authorize CASPA to release information about your application and admissions status to the designated health professions advisor at the schools you have previously attended.**

Please check this box if you agree with this authorization. This field is not required.

**How did you first hear about the PA Profession/PA education?**

Select your answer from the drop down menu. While this data assists in collecting data about recruitment of applicants to the PA profession, this field is not required.

**What was the most influential factor in bringing you to the PA profession/PA education?**

Select your answer from the drop down menu. While this data assists in collecting data about recruitment of applicants to the PA profession, this field is not required.

**Click Save.**

### HEALTH RELATED TRAINING

*This section is not required if you do not have any health care certifications.*

**Add New Entry:**

Click this selection to add a current certification. Do not add any certifications which have expired.

**\*Type:**

List type of certification

**\*Agency/School/Sponsor:**

List agency, school or sponsor which issued your certification

**\*Attendance Date From:**

Select your Start Month and Start Year from the drop down menus

**\*Attendance Date To:**

Select your End Month and End Date from the drop down menus

**\*Did you receive a certificate?:**

Select Yes or No

**Click Save. You may repeat this process for each certification**

### NARRATIVE

**\*Personal Statement/Narrative. Please describe your motivation towards becoming a PA:**

Please enter your personal narrative in the space provided. There is a 5,000 character limit, which includes spaces, carriage returns, numbers, letters, etc.

**Click Save.**

### WORK AND VOLUNTEER EXPERIENCE

This section is not required if you do not have any work or volunteer experience in the following categories:

- Patient Care Experience
- Other Health Care Experience
- Health Care Shadowing
- Research
- Community Service
- Other Work Experience
- Awards, Honors & Leadership

*\*Be careful not to duplicate work experience hours in multiple sections. Report work experience in the section that best describes the type of experience. If the position duties encompass more than one section, enter the position in both sections and divide the hours and duties accordingly. A 40 hr/wk position with 10 hrs/wk of research and 30 hrs/wk of direct patient care would be entered under both research and patient care sections with the appropriate hours and duties listed within each section). **Please be sure to read the instructions before entering your information.***

**Click the drop down menu for category options.**

**Select your category.**

**Click Add New Entry.**

\*Under each category, the question fields are the same. If you choose to enter any work or volunteer experience, you must complete the following questions regarding each experience:

- Position Title
- Employer
- City
- State
- Supervisor
- Start Month and Start Year. Select from the drop down menu
- End Month and End Year. Select from the drop down menu

- Frequency. Select from the drop down menu
- If you answered “Seasonal” or “Varied Hours” for the previous question please provide an explanation. This field is not required and has a 250 character limit
- Average Hours Per Week. Enter hours average hours per week
- Hours accrued at the time of application. Enter hours accrued at time of application
- Still Current? Select Yes or No
- Were you paid? Select Yes or No
- Employer Telephone. Enter the telephone number of your employer. Use 555-555-5555 format
- Duties. Describe your job duties in 660 character or less

**Click Save. You may repeat this process for each experience.**

## ACADEMIC HISTORY

### TESTS

**Please provide information about any of the listed tests that you have taken or plan to take.** Your program may have a [GRE Code](#), to which your official score can be sent directly to CASPA. You must choose the CASPA-specific GRE codes via the [ETS website](#) or they will not be sent directly to CASPA. This section is not required if you have not or do not plan to take any of the tests listed, or your program does not require testing for admissions. Programs may still request that official scores be sent either to CASPA or directly to the program.

**Click the drop down menu for test options.**

**Select your test.**

**Click Add New Entry.**

*If you select GRE, the following categories are required:*

- \*Status. Select Planned or Taken
- \*Month. Select month from the drop down menu
- \*Year. Select year from the drop down menu
- Verbal: Enter your verbal score. This box is not required.
- Verbal Percentile: Enter your verbal percentile. This box is not required.
- Quantitative: Enter your quantitative score. This box is not required.
- Quantitative Percentile: Enter your quantitative percentile. This box is not required.
- Analytical Writing: Enter your analytical writing score. This box is not required.
- Analytical Writing Percentile: Enter your analytical writing percentile. This box is not required.

**Click Save.**

*If you select MCAT, the following categories are required:*

- \*Status. Select Planned or Taken
- \*Month. Select month from the drop down menu
- \*Year. Select year from the drop down menu
- MCAT Verbal Reasoning: Enter your verbal reasoning score. This box is not required
- MCAT Physical Sciences: Enter your physical sciences score. This box is not required

- MCAT Biological Sciences: Enter your biological sciences score. This box is not required
- MCAT Writing Sample: Enter your writing sample score. This box is not required

**Click Save.**

*If you select TOEFL, the following categories are required:*

- \*Status. Select Planned or Taken
- Month. Select month from the drop down menu
- Year. Select year from the drop down menu

**Click Save.**

### Institutions Attended

Click 'Add New College.'

**\*Find a College:**

Click inside the box and select the institution. If you cannot locate your institution, click one of the following options:

- Not Listed US Institution
- Not Listed Canadian Institution
- Non-US/Canadian (Foreign) Institution

**If "Not Listed US/Canadian Institution," enter School Name:**

Enter institution name if you cannot choose it from the box above

**If "Not Listed US/Canadian Institution," enter school state:**

Enter institution state if you cannot choose the institution from the first box

**\*Attendance Date From:**

Select start date and year from the drop down menus

**\*Attendance Date To:**

Select end date and year from the drop down menus

**Click Save. You may repeat this process for each institution attended.**

**\*\*Once all institutions have been entered, you will be taken to a new screen in which you will need to enter additional information about the institutions, including:**

- \*Degree. Select degree type from the drop down menu
- Degree, if other. Enter degree name if 'other.' This field is not required.
- \*Degree Status. Select degree status from the drop down menu
- \*Date Degree Earned or Anticipated Month. Select month degree earned or expected, if applicable, from the drop down menu

- \*Year. Select the year degree earned or expected, if applicable, from the drop down menu
- \*Major for Degree. Select course of study that most closely matches your major, from the drop down menu
- \*1<sup>st</sup> Major, if other. Enter major name if 'other.'
- \*Second Major or Minor for Degree. Select course of study that most closely matches your second major or minor, from the drop down menu. Enter no major if there is not second major or minor.
- 2<sup>nd</sup> Major or Minor, if other. Enter 2<sup>nd</sup> major or minor name if applicable. This field is not required.

## COURSEWORK

### Coursework Entry instructions

Please [Click Here](#) to view the CASPA Coursework Entry Instructions

CASPA has a new coursework tutorial video! You may view the tutorial here: [CASPA Coursework Instructional Video](#). Please note that this is a very basic tutorial. For more in-depth instruction on how to enter your coursework, please click the "Instructions for This Section" icon at the top right of the application page.

## REFERENCE FORMS

Click "Add New Entry" to your references in this section. When you enter your reference's information, an automated email request will be sent to them as soon as you click the "save" button. This email will contain a link to the online CASPA reference portal and login information. Once your references logs in, they will fill out profile information, rate your performance in several areas on a checklist, and type or copy/paste their actual letter of recommendation into a text box. CASPA requires you to enter THREE references, even if the programs to which you are applying only require two.

*\*PLEASE NOTE: All letters of reference are required to be submitted to CASPA electronically via the CASPA reference portal. CASPA will NOT accept paper letters of reference and no reference material should be physically mailed to CASPA.*

Click 'Add New Entry.'

**\*I waive my right of access to this reference:**

Select Yes or No

**\*Reference's Title (Dr., Mr., Ms., etc):**

Enter reference title

**\*Reference's First Name:**

Enter reference first name

**\*Reference's Last Name:**

Enter reference last name

**\*Reference's Occupation:**

Select reference occupation from the drop down menu

**If other occupation, please specify:**

Enter occupation if other. This field is not required.

**\*Reference's phone number:**

Enter reference phone number. Use XXX-XXX-XXX format. This field is not required.

**\*Reference's Email Address:**

Enter reference email address

**\*Confirm Email Address:**

Re-enter reference email address

*\*\*Once this section is complete, the applicant will receive an email notifying them that the referee has been contacted directly by CASPA to complete reference on behalf of the applicant.*

**Click Save. Repeat this process for each reference.**

**MY PROGRAMS**

*PLEASE NOTE: Once you designate a program, some programs have provided a link to their Supplemental Application in the right hand column by listing "Yes →." Please click the → link to be taken to the program website to fill out the supplemental application. If a program requires a Supplemental Application but no arrow is provided, please go directly to the program website for instruction.*

**Click the Blue 'Plus' Icon**

**Select all programs which you would like to apply to**

Please note the CASPA Application submission date

Please note the Supplemental Application requirement

**\*Previously Applied:**

Select Yes or No for each program you apply to

**Click Save.**

Review your designated programs carefully. Once you submit your application, you have applied to all programs selected. CASPA does not issue refunds once the application has been e-submitted for any reason, including a passed deadline or error in choosing designations. Also note the total cost of applications to your designated program(s).

**[Transcript Information](#)**

Once you have entered all coursework into the CASPA application, you should request official transcripts from all U.S. and English-speaking Canadian institutions to be sent directly to CASPA. CASPA will then verify your entered coursework against your transcripts.

### Foreign Transcript Information

All foreign and French Canadian transcripts should be evaluated by a foreign transcript evaluation service. Once, completed, evaluations should be sent directly to CASPA by the evaluation service. If required by the program, you may have to send an original copy of the evaluation directly to the program.

### Academic Update

Once your application is e-submitted, your application is locked and most sections cannot be updated for the remainder of the application cycle. Once your application is in “verified” status, you will have the ability to update the coursework section of your application using a system called “Academic Update.” This allows you to change courses previously listed as “planned/in-progress” to “complete” and self-report the grades received for these classes. These transcripts should be sent directly to the programs to which you applied, not CASPA, as CASPA does not verify these transcripts.

### **Program Deadlines**

CASPA participating programs choose from eight application submission deadlines. Each program’s submission deadline can be found on the [Participating Programs](#) list. The eight deadline options are listed below:

- June 15
- August 1
- September 1
- October 1
- November 1
- December 1
- January 15
- March 1

### **Application Deadline Definitions**

For their chosen application deadline, programs can choose one of the following three options to define the requirements of their application deadline. Check the [Participating Programs](#) list for each program’s deadline definition.

1. **E-submitted application:** applicants must e-submit their CASPA application by 11:59pm EST on the deadline date posted. Documents are not required to be received by the deadline date.
2. **Completed application:** applicants must have a complete application by the deadline date posted. A complete application requires that the application is e-submitted and all transcripts, payments, and at least two letters of reference have been received by CASPA and attached to the application. Documents should be sent to CASPA several weeks prior to the deadline date to ensure all items arrive on time.
3. **Verified application:** applicants must have their application verified (GPA calculation completed) by the deadline date posted. To ensure the application is verified on time, applications must be completed (e-submitted, payment received, transcripts received, and two letters of recommendation received) at least four weeks in advance of the deadline date.

### **CASPA Application Cycle Shut Down Period**

The CASPA shut down period occurs each year between mid-March to mid-April for enhancements and application changes to occur.

### **Supplemental Deadlines**

Some programs may require a supplemental application or supplemental application materials. Please see the [Participating Programs](#) list and click on each individual program for further information regarding supplemental applications and materials.

### **Fee Schedule**

The fee for the first designation is \$175. There is a \$45 fee for each additional designation. Please [Click Here](#) to view the 2013-2014 fee schedule.

### **Payment Information**

CASPA accepts Visa or MasterCard online or you may mail in a money order. CASPA does not accept personal checks. Please [Click Here](#) to view the 2013-2014 payment information.

### **Fee Waivers**

CASPA does offer fee waivers for applicants meeting the criteria set forth by the [U.S. Department of Health and Human Services](#). Fee waiver requests must be submitted to CASPA **before** submitting your application. Once you submit an application, you **will not** qualify for a fee waiver. Please [Click Here](#) to view the 2013-2014 fee waiver information.

### **GPA**

Please [Click Here](#) to view the 2013-2014 GPA information.

### **Notifications**

CASPA will automatically email you for the following reasons:

- You create a new CASPA application account
- You e-submit your CASPA application
- Your transcript has been processed
- Your GPA has been calculated and processed
- If CASPA has received an incomplete or invalid transcript(s)
- If there is a problem with the “Coursework” section of your application

It is your responsibility to frequently login and check the status of your file and materials.

### **Checking your Status**

Check your application status online or with the CASPA mobile application portal. To view the real-time progress of your file:

- Login to your CASPA application
- Select the status options on the right-hand side of the screen.

- Read any notifications in the “My Messages” section on the left-hand side of the screen

CASPA is not responsible for any materials lost in the mail or for delays caused by registrars’ offices. You are responsible for monitoring the status of your application, as well as the receipt of your documents, and alerting CASPA of any questions or concerns you have regarding your application status in a timely manner.