

## STATEMENT OF HPAC POLICIES & PROCEDURES

The Health Professions Advisory Committee (HPAC) provides letters of evaluation for applicants to medical, dental, and optometry programs. This service is open to current University of Richmond (UR) students and alumni who have completed at least 50% of their pre-health science prerequisites at UR.

An HPAC letter will be written for an eligible student only if the following items are received by the stated deadlines.

### 1. HPAC Questionnaire

This electronic document includes the student's work/activities and responses to several essay questions related to his/her interest in medicine or dentistry. The HPAC Questionnaire is available on the Office of Alumni and Career Services' (OACS) web page and must be completed using Adobe Acrobat software. (Important Notes: 1. Save the questionnaire to your desktop before entering information. 2) Mac users should not use Preview to complete the questionnaire.) The completed questionnaire must be e-mailed to Ms. Deatrice Cleaton ([dcleaton@richmond.edu](mailto:dcleaton@richmond.edu)) no later than 11:59 PM on **January 15** of the year in which application will be made to professional school. (Note: This is a firm deadline and exceptions will be granted only in unusually compelling circumstances.)

### 2. Transcripts

Transcripts for all college-level coursework must be submitted to [dcleaton@richmond.edu](mailto:dcleaton@richmond.edu) by **January 15** of the year in which application will be made to professional school. The UR e-transcript should be requested online through the Registrar's web page. (Current students should hold for Fall grades.) Transcripts (official or unofficial) from other colleges attended may be provided electronically or by hard copy.

### 3. Supporting Letters of Recommendation

A minimum of four (4) letters of recommendation, two of which must come from UR science faculty (Biology, Chemistry, Physics only) whom you have had for lecture. At least two recommendation letters should be in your credential file prior to your scheduled interview date. The remaining letters must be received by **May 1<sup>st</sup>**. Recommendation letters should be on letterhead, contain a physical signature, and be addressed to the attention of the Health Professions Advisory Committee.

By signing below, I certify that I have read and understand the above policies.

Print Name: \_\_\_\_\_ UR ID #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*\*Return completed form to Deatrice Cleaton, Gottwald Science Center, B100.\*\**