

- **VMCA Application Opens January 23, 2024**
- **VMCA Application Deadline: September 16**

Create an Account

The information below will be provided to the admissions offices at the programs to which you apply. Please provide complete and accurate information within the application.

Legal Name

First Name

Middle Name

Last or Family Name

Suffix (Jr., Sr., III, etc.)

Contact Information

Phone Number

Mobile Number

Home Address

City

State

Zip

E-mail Address

Emergency Contact Name

Emergency Contact Phone Number

Emergency Contact E-mail Address

Text and Phone Authentication

Enter the characters shown in the image below into the text box to verify your identity.

designated

Username and Password

Your username must be at least 6 characters. Your password must be a minimum of 8 characters and contain at least one lower and uppercase letter, one number, and a special character.

* Username

* Password

Password cannot contain username.

Minimum of 8 Characters

1 lowercase letter

1 uppercase letter

1 number

1 special character

* Confirm Password

Terms and Conditions

Terms of Use

These Terms of Use constitute an agreement ("Agreement") between you and Liaison International.

My extended MedFronier Desktop

[Home](#)
[About](#)
[Contact Us](#)
[Privacy Policy](#)

[Log In](#)
[Sign Up](#)

[Home](#)
[About](#)
[Contact Us](#)
[Privacy Policy](#)

[Log In](#)
[Sign Up](#)

[Home](#)
[About](#)
[Contact Us](#)
[Privacy Policy](#)

[Log In](#)
[Sign Up](#)

[Add Program](#)
[Submit Application](#)
[Check Status](#)

[Home](#)
[About](#)
[Contact Us](#)
[Privacy Policy](#)

[Log In](#)
[Sign Up](#)

[Home](#)
[About](#)
[Contact Us](#)
[Privacy Policy](#)

[Log In](#)
[Sign Up](#)

[Home](#)
[About](#)
[Contact Us](#)
[Privacy Policy](#)

[Log In](#)
[Sign Up](#)

My Application

Add Program

Submit Application

Add Programs

Programs will be available starting May 19. Visit [VMSAR](#) for program-specific information and admissions requirements.

Find Program | View Selected Programs

Search for a Program or Organization



Filters

Showing results for Available Programs

Add	Program Name	Level	Start Term	Start Year	City
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Skip for Now



Submit Application

Submit Application

Make sure you understand all the requirements for each program you are applying to.

Once your application is submitted, you may be contacted by email.

1 2 3 4 5 6 7 8 9 10 11 12

1 2 3 4 5 6 7 8 9 10 11 12

1 2 3 4 5 6 7 8 9 10 11 12

1 2 3 4 5 6 7 8 9 10 11 12

1 2 3 4 5 6 7 8 9 10 11 12

1 2 3 4 5 6 7 8 9 10 11 12





Personal Information

0/7 Sections Completed

Release Statement

Biographical Information

Contact Information

Citizenship Information

Race & Ethnicity

Parent/Guardian

Other Information

Release Statement

You must review and respond to the following release statements to submit your application. Once you submit your application, your responses cannot be edited. Review these instructions and the content of the statements carefully. It's your responsibility to read

Statement 1: Release of Information

By submitting this application, you are releasing the following information to the Department of Health and Human Services (HHS) and its contractors, including the Centers for Disease Control and Prevention (CDC), for the purpose of conducting a public health investigation. This information includes, but is not limited to, your name, address, telephone number, and any other information you provide in this application. You understand that this information may be used for public health purposes and may be shared with other agencies as necessary to conduct the investigation. You agree to provide accurate and truthful information and to update the information as needed. You understand that providing false or misleading information may result in the denial of your application and may be subject to legal action. You understand that you are releasing this information to the public domain and that you may not be able to control the use of this information. You understand that you are releasing this information to the public domain and that you may not be able to control the use of this information.

Statement 2: Release of Information

By submitting this application, you are releasing the following information to the Department of Health and Human Services (HHS) and its contractors, including the Centers for Disease Control and Prevention (CDC), for the purpose of conducting a public health investigation. This information includes, but is not limited to, your name, address, telephone number, and any other information you provide in this application. You understand that this information may be used for public health purposes and may be shared with other agencies as necessary to conduct the investigation. You agree to provide accurate and truthful information and to update the information as needed. You understand that providing false or misleading information may result in the denial of your application and may be subject to legal action. You understand that you are releasing this information to the public domain and that you may not be able to control the use of this information. You understand that you are releasing this information to the public domain and that you may not be able to control the use of this information.

Applicant Release and Certification Statement

By submitting this application, you are releasing the following information to the Department of Health and Human Services (HHS) and its contractors, including the Centers for Disease Control and Prevention (CDC), for the purpose of conducting a public health investigation. This information includes, but is not limited to, your name, address, telephone number, and any other information you provide in this application. You understand that this information may be used for public health purposes and may be shared with other agencies as necessary to conduct the investigation. You agree to provide accurate and truthful information and to update the information as needed. You understand that providing false or misleading information may result in the denial of your application and may be subject to legal action. You understand that you are releasing this information to the public domain and that you may not be able to control the use of this information. You understand that you are releasing this information to the public domain and that you may not be able to control the use of this information.

* I give my permission for officials at all institutions that I list in my application to request information requested by my college of interest.
I understand and accept the terms of the information requested by my college of interest.
I understand and accept the terms of the information requested by my college of interest.

* I certify that the content of my application is my own original work and is not a representation of my experience.
I have not used any AI tools (e.g., ChatGPT) for resources to generate the content of my application.
I have not received assistance from other individuals beyond providing feedback on the content of my application.

Indicate your understanding and acceptance of the terms set forth above by checking this box.

Final Readers

* I have read and understand the AAVMCAS terms.

I understand that:

- I must record and provide my VMCAS ID when contacting VMCAS for questions or comments.
- I must request at least three recommendations in the Recommendations section.

VMCAS only accepts applications from students who are currently enrolled in a college or university.

It is my responsibility to check my application status through the VMCAS portal (Recommendations section).

I must verify the information I provide in my application.



Advisor Release

* By selection

The image shows a screenshot of a software application. At the top, there is a yellow header bar with the text '* By selection' on the left. Below the header is a white area containing several lines of very faint, illegible text. The text appears to be organized into sections, possibly representing a list or a set of instructions. The overall appearance is that of a standard desktop application window.

Dear Sir,

Reference is made to your letter of 15/11/2023.

Yours faithfully,

Yours faithfully,

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Former Name

* Do you have any materials under a former legal name?

Yes

No

Birth Information

* Date of Birth



MM/DD/YYYY

* Country of Birth

Select Country



* City of Birth

* State/Province of Birth

Select State/Province



* County of Birth

Select County



Legal/Preferred Name Phonetic Pronunciation

Enter the phonetic pronunciation of your first and last name or write a familiar word that rhymes with your name.

Phonetic

Example: [Phonetic Pronunciation](#)

Example:
[Phonetic transcription of a name]

Phonetic

Contact Information

Enter your contact information in this section. Keep this information up-to-date throughout the application process. Visit the [Applicant Help Center](#) for more information.

This screenshot shows a mobile application interface for entering contact information. The form is set against a dark blue background. At the top, there is a header with the text "Enter your contact information in this section. Keep this information up-to-date throughout the application process. Visit the Applicant Help Center for more information." Below the header, the form fields are arranged in a grid. On the left, there is a "Country / Territory" dropdown menu with a blue arrow icon. To its right is a "Zip / Postal Code" field. Below these, there are several text input fields for "First Name", "Last Name", "Address Line 1", "Address Line 2", and "City". A "Phone Number" field is located at the bottom right. The form is partially obscured by a dark red overlay at the bottom.

This close-up screenshot shows the "Country / Territory" dropdown menu. The text "What is your permanent address?" is visible at the top. Below it, the label "Country / Territory" is followed by a "Select a Country" dropdown menu with a blue arrow icon. The dropdown menu is open, showing a list of countries with their respective flags. The list includes: United States, Canada, Mexico, United Kingdom, France, Germany, Italy, Spain, Portugal, Greece, Turkey, India, China, Japan, South Korea, Australia, New Zealand, Singapore, Malaysia, Philippines, Indonesia, Thailand, Vietnam, Laos, Cambodia, Myanmar, Bangladesh, Pakistan, Sri Lanka, Nepal, Bhutan, and others. The background is a light blue gradient.

Phone

To make changes to your phone number, go to the [Profile Information](#)

* Preferred Phone Number

+12023719195

Mobile

Alternate Phone Number

Type

Email

To make changes to your email, go to the [Profile Information](#)

* Email

vmcastestDD@mailinator.com

Home

Alternate Email

If you only have one email address, please retype it here.

* Alternate Email Address

Save and Continue

Citizenship Information

What is your current citizenship? (If you have dual citizenship, please select your current citizenship.)

U.S. Citizenship Information

U.S. Citizen

Select Citizenship



Current U.S. Citizen

Do you have dual citizenship?

Yes



Residence Information

Legal State of Residence

Select State



Legal State of Residence

Legal State of Residence

Legal State of Residence

Legal State of Residence

Race & Ethnicity

Do you identify as any of the following?

Yes

White, Black or African American, Hispanic or Latino, Asian, American Indian or Alaska Native, Native Hawaiian or Other Pacific Islander, Other race



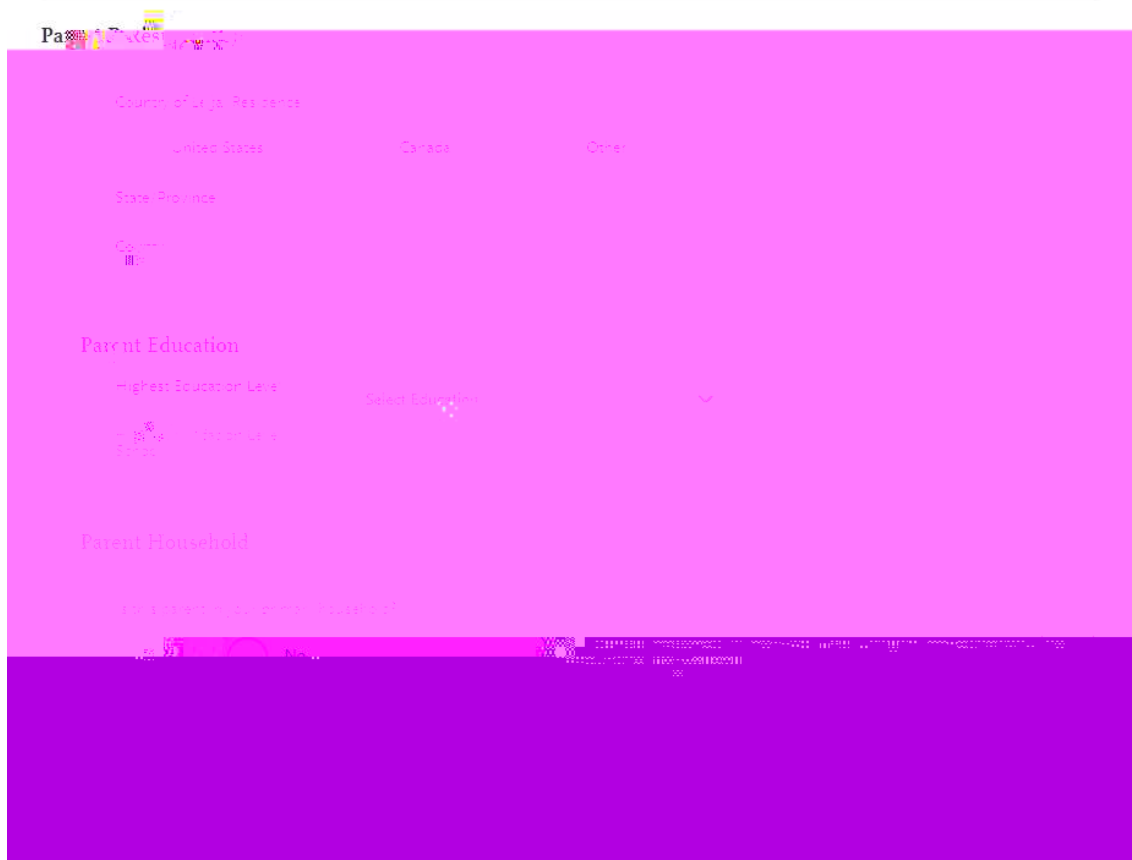
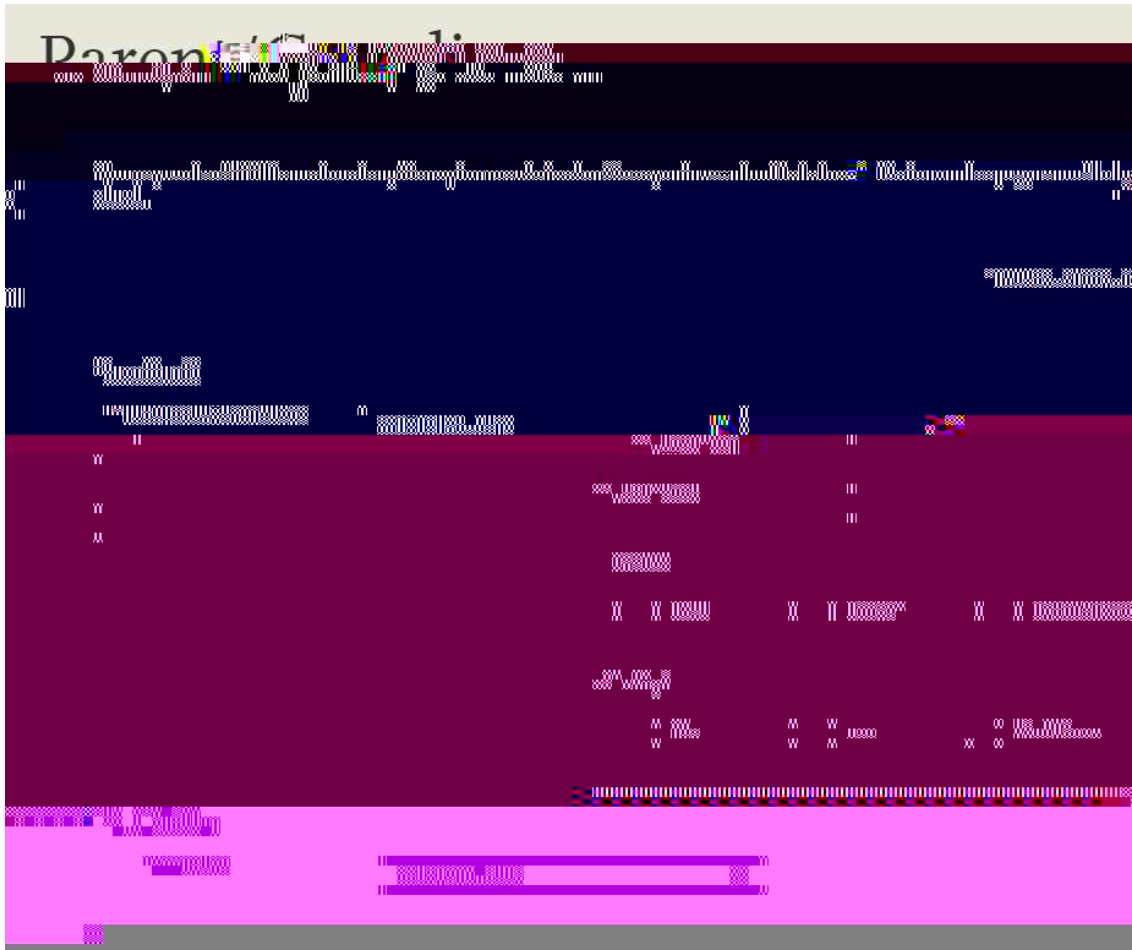
1/1/1

Save and Continue

Parent/Guardian

Are you the biological parent or legal guardian of the child? (You can be a parent or guardian if you have legal custody of the child.)

Yes



Other Information

Enter your responses to these additional questions. Visit the [Applicant Help Center](#) for more information.

Once you submit your application, you can update

The screenshot shows a web application form with a dark blue header and a light blue body. The form contains several sections with labels and input fields. At the top, there is a section for 'Additional Information' with a text area. Below that, there are sections for 'Current Address', 'Home Address', and 'Mailing Address', each with a label and a text area. There are also sections for 'Phone Number' and 'Email Address'. At the bottom, there are sections for 'Year of Birth' and 'Year of Graduation'. The form is partially obscured by a dark blue overlay at the bottom.

Additional Information

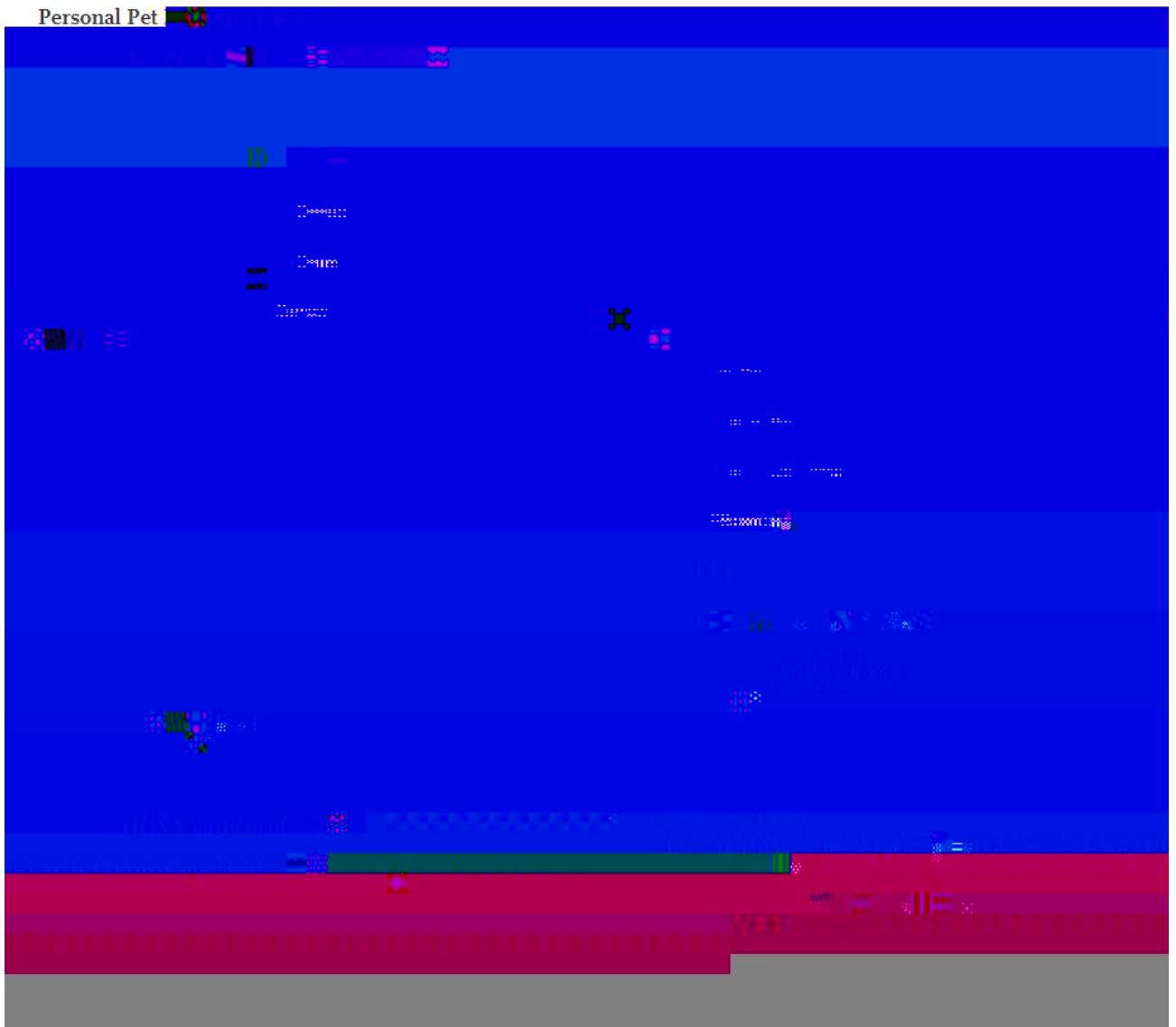
Your primary college or university is the college or university where you will earn (or have earned) your first

The screenshot shows a web application form with a dark blue header and a light blue body. The form contains a section for 'Primary College or University' with a text area. Below that, there are sections for 'Year of Birth' and 'Year of Graduation'. The form is partially obscured by a dark blue overlay at the bottom.

Previous Applications



Personal Pet





Academic His



Wilmington

Sully

Thammasak

Wilmington

High School Attended

Enter the high school that you graduated and received a high school diploma from. [View All Schools](#)

+ Add Your High School

High School Attended

Add Your High School

Enter details from the high school where you received your degree below.

* All dates required field

What high school did you attend?

City

State

State

Did you graduate from this high school?

Yes

No

> 20



Colleges Attend

The image shows a complex, abstract graphic design. It features a white background with several overlapping, semi-transparent colored rectangles in shades of red, blue, green, and yellow. The rectangles are arranged in a way that creates a sense of depth and movement. A large, semi-transparent black rectangle is positioned in the lower right quadrant, partially covering the other elements. The overall composition is dynamic and visually busy.

* What type of firm system does the

The image shows a complex, abstract graphic design. It features a white background with several overlapping, semi-transparent colored rectangles in shades of red, blue, green, and yellow. The rectangles are arranged in a way that creates a sense of depth and movement. A large, semi-transparent black rectangle is positioned in the lower right quadrant, partially covering the other elements. The overall composition is dynamic and visually busy.

Colleges Attended

Report all institutions attended, regardless of:

- Their relevance to the programs you're applying to, and
- Whether the coursework completed there was transferred to another institution.

Regardless of the number of degrees earned or gaps in the degree record.

Colleges and Universities Attended

BOSTON UNIVERSITY

*** Foreign transcripts (including French Canadian Institutions) must be evaluated by World Education Services (WES) and submitted to VMCAS. VMCAS requires a course by course evaluation from WES. It is recommended that transcript(s) be submitted to the translation service (WES) at least one month before the VMCAS deadline. VMCAS does not require a WES from English speaking Canadian institutions.**

Transcript Entry



* Indicates required field.

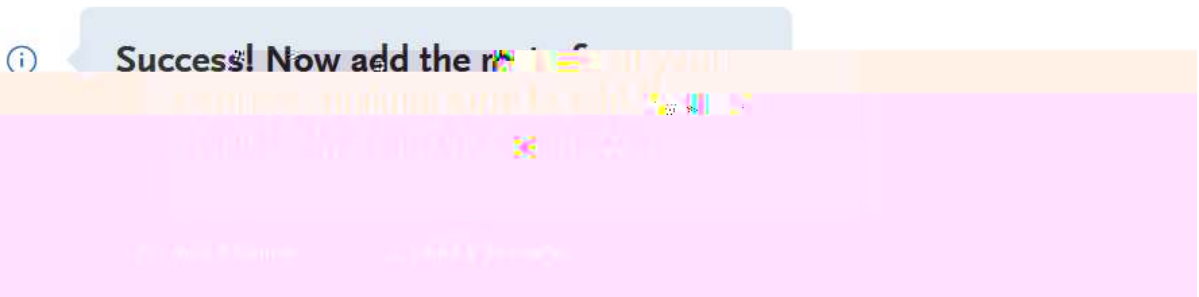
*TERM	*YEAR	*ACADEMIC STATUS	*COMPLETION STATUS
Fall	2015	Graduate	Completed

Cancel Save



* Indicates required field.

* COURSE CODE	* COURSE TITLE	* SUBJECT	* CREDITS	* GRADE	CAS GRADE
Chem 411	Advanced Chem Theory	Chemistry	4.00	A	A



BOSTON UNIVERSITY Transcript

Fall 2018 Spring 2019 Summer 2020

* Indicates required

*TERM	*YEAR	*ACADEMIC STATUS	*COMPLETION STATUS	COURSE CODE	COURSE TITLE	SUBJECT	CREDITS	GRADE	CAS GRADE
Fall	2018	Freshman	Completed	BIO 101	Biology I	Biology	3	C-	C-
Spring	2019	Freshman	Completed	BIO 201	Biology II	Biology	3	B-	B-
Summer	2020	Freshman	Completed	BIO 101	Biology I	Biology	3	C-	C-

Prerequisites Information:

Some programs which you are applying have prerequisites. Please enter coursework that fulfills these prerequisites.

WCAS Test Organization

Test Program

Math

Chemistry

English

Science

History

Art

Physical Education

Other

Standardized Tests

Click on the link to add your standardized test scores or report tests you plan to take in this section. Some of the programs you apply to require you to submit standardized scores, or submit to make sure you're completing all requirements. Visit [Admission Help Center](#) for more information.

Once you submit your application, you cannot edit previously entered test scores.

For more information, visit [Admission Help Center](#).

I Am Not Adding Any Standardized Tests

GRE

[Add Test Score](#)

IELTS

[Add Test Score](#)

MCAT

[Add Test Score](#)

1 2 3 4 5 6 7 8 9 10 11 12

Add Your Tests



missing. Once you have submitted, you will be able to add additional tests as well as update the...

100%

100%

100%

100%

100%



Supporting Information



Essays

Recommendations

Experiences

Achievements

Licenses and Certifications

Essays

1. [\[Essay Title\]](#) | [\[View\]](#) | [\[Download\]](#)

2. [\[Essay Title\]](#) | [\[View\]](#) | [\[Download\]](#)

3. [\[Essay Title\]](#) | [\[View\]](#) | [\[Download\]](#)

Experiences

1. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

2. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

3. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

4. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

5. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

6. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

7. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

8. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

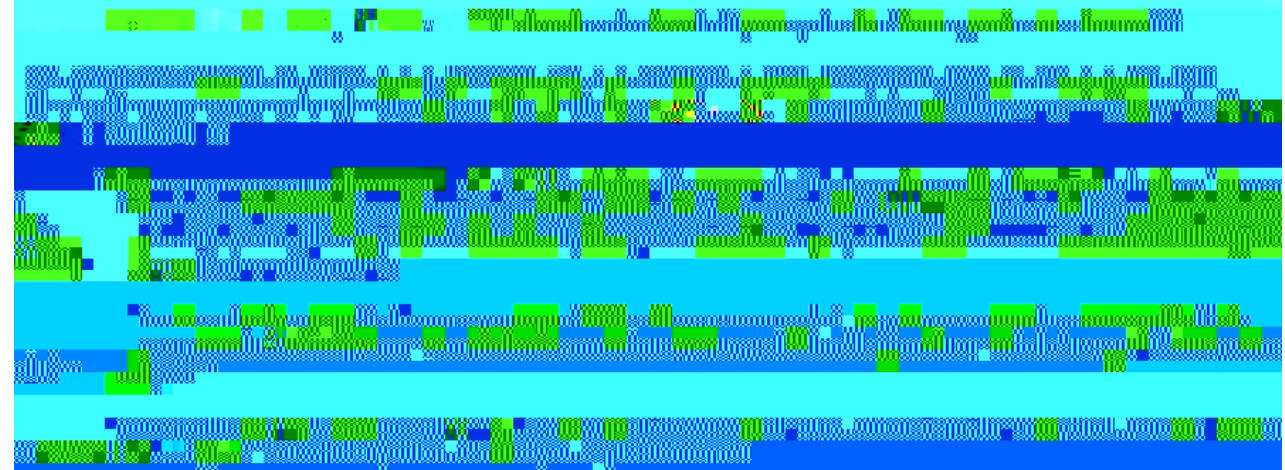
9. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

10. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

11. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

12. [\[Experience Title\]](#) | [\[View\]](#) | [\[Download\]](#)

Recommendations



Recommendation 1



Create Recommendation Request

Form for creating a recommendation request. Includes fields for 'Recommendation Request' (with a dropdown menu), 'Requester Name', 'Requester Email', 'Requester Phone', 'Requester Address', and 'Requester City'. There is also a 'Requester Country' dropdown and a 'Requester State' dropdown. A 'Requester Zip' field is present. A 'Requester Title' field is also visible. The form has a 'Submit' button at the bottom right.

Recommendation Request: ▼

Requester Name:

Requester Email:

Requester Phone:

Requester Address:

Requester City:

Requester Country:

Requester State:

Requester Zip:

Requester Title:

Experiences

You may update the information

The screenshot shows a resume page with a dark blue header containing the word 'Experiences'. Below the header, there is a list of job entries. Each entry includes a company name, a job title, and a date range. The text is partially obscured by a redaction box. The layout is clean and professional, with a clear hierarchy of information.

Experiences

This screenshot shows a more detailed view of the 'Experiences' section. The header is dark blue with the word 'Experiences' in white. Below the header, there is a list of job entries. Each entry includes a company name, a job title, and a date range. The text is partially obscured by a redaction box. The layout is clean and professional, with a clear hierarchy of information.

Supervisor

First Name

Last Name

Title

Contact Phone



Current Experience

Yes

No

End Date

Status

Employee Details

* Title

Start Date	End Date	Title	Status
2015-01-01	2015-12-31	Supervisor	Active
2016-01-01	2016-12-31	Supervisor	Active
2017-01-01	2017-12-31	Supervisor	Active
2018-01-01	2018-12-31	Supervisor	Active
2019-01-01	2019-12-31	Supervisor	Active
2020-01-01	2020-12-31	Supervisor	Active
2021-01-01	2021-12-31	Supervisor	Active
2022-01-01	2022-12-31	Supervisor	Active
2023-01-01	2023-12-31	Supervisor	Active
2024-01-01	2024-12-31	Supervisor	Active

Licenses and Certifications

You may update the information in this section at any time prior to submission. Once you have submitted, you will be able to add more Licenses and Certifications, but you will not be able to update or delete completed Licenses and Certifications.

Add a new professional license and certification by clicking on the plus icon in the top right corner.

When you click on the plus icon, you will be taken to the Add License and Certification page.

The screenshot shows a form titled "Add License and Certification" with a blue header. The form contains several input fields: a "Type" dropdown menu, a "Title" text field, an "Organization Name" text field, a "License Number" text field, and an "Issued Date" field with a calendar icon and a date format "MM/DD/YYYY".

Licenses and Certifications

Add Your Licenses and Certifications

You may update the information in this section at any time prior to submission. Once you have submitted, you will be able to add more Licenses and Certifications, but you will not be able to update or delete completed Licenses and Certifications.

add field

Details Name

* Type

Select Type

* Title

* Organization Name

License Number

Issued Date

MM/DD/YYYY