2018 Dental School Applicant Information

The Health Professions Advising Office offers a centralized processing service to assist students who are applying to medical, dental, or optometry schools. These services include the following: the distribution of application support materials, compilation of faculty evaluations and other pertinent information on each student, and forwarding of these materials to the school(s) of the applicant’s choice. We offer this service because most professional schools prefer a centralized system of gathering application support materials.

One of the goals of the Health Professions Office is to help you with all aspects of the application process. However, it is your responsibility to see that the required materials reach our office by the deadlines.

In order to assist you with the application process, the following checklist is provided:

☐ Make arrangements to take the DAT. Registration available at: http://www.ada.org/dat.aspx.
  - The DAT is typically offered year-round. Almost all dental schools will accept DAT scores taken prior to the October that proceeds the matriculation year. Check with individual schools for exact requirements, as they may vary.
  - Example: for a student wishing to matriculate to dental school in the fall of 2018, taking the DAT September 2017 or earlier is recommended.
  - For many students, taking the DAT for the first time in April or May is a good strategy; if you are pleased with your spring score, you may apply much earlier in the cycle. If you need time to prepare for a second attempt in July, August, or even September, you have that opportunity.
  - Students are encouraged to take the DAT when they feel adequately prepared to take the exam. The ADA has implemented a life time limit of no more than three times to take the DAT. An applicant who wishes to take the exam more than three times must be granted special permission by the ADA.

☐ Complete the UA Pre-Application (UA Pre-App), and return it to the Health Professions Advising Office.
  - The priority deadline for UA Pre-App submission is March 29, 2017. UA Pre-Apps received after March 29th cannot be guaranteed a committee interview with our office.
  - A recent photo is required and must be included with your UA Pre-App.
  - Most supplemental applications will require a photo. Ensure this photo is a headshot of you in professional/business casual attire. The goal is to present yourself as a mature professional.
  - The Health Professions Advising Office WILL NOT conduct your committee interview without your completed UA Pre-App, photo, and your letters of recommendation.
Contact, in person, the faculty members and personal references who will be completing the evaluation forms for you, and request that those be returned to the Health Professions Advising Office.

- Use the evaluation forms to request academic and personal letters of recommendation. These forms can be found under the “2018 Applicants” tab of [www.prehealth.ua.edu](http://www.prehealth.ua.edu)
- Sign and date the forms prior to sending them to your recommenders.
- You should request a maximum of five letters: 2-3 from faculty who have taught you in a college course, and 1-2 personal references. More is not always better.
- Good choices for personal references include dentists you have shadowed, former employers, volunteer coordinators, etc. Do not ask an immediate family member for a letter of recommendation.
- Letters should be on official letterhead when possible and always signed by the recommender.
- Upon completion, letters should be returned to prehealthrecs@ua.edu or mailed to: Health Professions Advising, Letters of Recommendation Box 870268 Tuscaloosa AL 35487-0268.

Complete a committee interview the Health Professions Advising Office.

- Your UA interview WILL NOT be scheduled until you have submitted your UA Pre-App and all of your recommenders have submitted their letters to our office. However, the submission of your AADSAS/primary application should not be delayed by this interview.
- You may submit your primary application before the committee interview and before your letters of recommendation are submitted.
- The committee interviews are held at the end of the spring semester. Please plan ahead.
- The interview with the committee serves two purposes; first, it gives the committee an opportunity to spend some time with the candidate before crafting the committee letter of recommendation, and second, allows the candidate to get a feel for what the professional school interviews will be like.
- We combine the five letters of recommendation with our own letter to create a composite evaluation, which is sent to the dental schools.
- All committee letter packets (committee letter plus your individual letters of recommendation) will be uploaded to ADEA AADSAS prior to or on August 1st 2017.

Complete primary dental school application(s) through AADSAS, or apply directly to those schools which do not participate in AADSAS.

- You must submit your primary applications to most dental schools online. The online application is your official and primary application to professional school. You are responsible for submitting your primary application. Our office does not do this. [https://portal.aadsasweb.org/](https://portal.aadsasweb.org/) will ‘go live’ for 2018 in June of 2017. Check the websites of other schools if they are not AADSAS participants (e.g. UT Memphis). A complete list of AADSAS schools is available through the ADEA at [http://http://www.adea.org](http://http://www.adea.org).
• If your primary application is ready to submit prior to your letters of recommendation being submitted to our office, do not wait to submit your primary application.

• The recommendation letters are an important part of your secondary application, which the dental schools will send you directly after you have applied through the primary online application service. It is your secondary application that is not complete without letters of recommendation – not the primary.

• It is our strong recommendation that you submit your primary application no later than September 1st.

☐ Make arrangements to have your official transcript(s) sent directly to AADSAS and/or receiving schools from the University Registrar’s Office.

  • The Health Professions Advising Office does not send transcripts.
  • Request your UA transcript through your MyBama or at http://registrar.ua.edu/services/transcripts/.
    Fees may apply.
  • If you have transfer work, you must also have this transcript sent directly from each college/university. AP credit shows on your official UA transcript.

You will undoubtedly have questions about your application to dental school throughout the process. Please do not hesitate to contact us with any questions or concerns you have.

Good luck with your applications! We look forward to working with you.

-The Health Professions Advising Team
The University of Alabama
Health Professions Advising Office
Cycle 2018 Dental Applicant Timeline

November 7th and 15th, 2015: First Mandatory Meeting of 2017 Application Year.


Complete Secondary Application AS SOON AS YOU GET THEM!

March 29th, 2017: ALL Application Materials Due to our office. This includes:
- UA Pre-Application
- Picture
- Grade Trends Worksheet
- Letters of Recommendation
Incomplete file = No Interview

Early June: The ADEA AADSAS application cycle generally opens on or around June 1.

Start Interviewing at Dental Schools.

Submit Letter of Recommendation Request to Faculty/Community Members.

Note: Dates are subject to change!
REQUEST FOR A LETTER OF RECOMMENDATION
UA HEALTH PROFESSIONS ADVISING OFFICE
CYCLE 2017

THIS SECTION TO BE COMPLETED BY THE STUDENT:

STUDENT’S NAME: ___________________________________________________UA CWID: ______________________
STUDENT’S EMAIL: ___________________________________________@crimson.ua.edu

HOW DO YOU KNOW THIS EVALUATOR? ________________________________
(Professor, Physician I shadowed, Extracurricular/Work Supervisor, etc.)

If Applicable:
1) Course taught: ___________________________________Semester/Year: ____________________Grade: _________
2) Course taught: ___________________________________Semester/Year: ____________________Grade: _________

I hereby voluntarily waive and relinquish access to this confidential evaluation:  ____________________________________________________    ______________
Student Signature                                    Date

I request that my letters be submitted
to the UA committee by the following date: _________________________________________________________________

It is strongly recommend that you choose to waive your right to view your letters.
Give letter writers at least two weeks to complete your letter. If you have questions, please ask.

TO THE EVALUATOR:

The Health Professions Advising Committee will use the information you provide to write a composite recommendation of the above named student to medical, dental, or optometry school, as well as send a copy of your letter to the professional schools. Your input in the following areas will be especially useful:

1. Do you think he/she has performed at or below his/her potential? Do you think the academic record and test scores of this student are a good indication of his/her potential in the health professions? If not, please specify the qualities or circumstances of the student that would help put such quantitative measurements in better perspective.

2. Please make additional comments that address the qualities of this student such as: MOTIVATION, WORK HABITS, EMOTIONAL MATURITY, ABILITY TO COMMUNICATE, ABILITY TO WORK WITH OTHERS, and LEADERSHIP. Please visit: https://www.aamc.org/download/349990/data/lettersguidelinesbrochure.pdf for a list of detailed competencies.

3. FOR PROFESSIONAL EVALUATORS: Please make comments that address your observance of Interpersonal and Intrapersonal behaviors such as: TEAMWORK, CULTURAL COMPETENCE, SOCIAL SKILLS, RESILIENCE, ETHICAL RESPONSIBILITY TO SELF AND OTHERS, DEPENDABILITY, and ORAL COMMUNICATION. Please see link above for a list of detailed competencies.

4. Please indicate your summary recommendation by indicating from the choices below. Your recommendation should be based on the applicant as compared to other pre-health professional students with whom you have worked.

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<tr>
<th>Top Quartile</th>
<th>Second Quartile</th>
<th>Third Quartile</th>
<th>Bottom Quartile</th>
<th>No Recommendation</th>
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EVALUATOR SIGNATURE: ___________________________ DATE: ___________________________
TITLE/DEPARTMENT/CONTACT PH#: ___________________________ (attach business card if possible)

PLEASE RETURN THIS FORM AND YOUR LETTER TO:
HEALTH PROFESSIONS ADVISING
BOX 870268
TUSCALOOSA, AL  35487-0268
OR SEND AS AN EMAIL ATTACHMENT TO:
PREHEALTHRECS@UA.EDU

Professional schools will not accept letters that are not signed and on department letterhead.
Questions? Call (205) 348-5970