



Health Professions Advising
Box 870268
Tuscaloosa, AL 35487
prehealth@ua.edu



OPTOMETRY SCHOOL
2017 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 OAT. Registration information is available online:
<https://www.ada.org/oat/index.html>

- The OAT is typically offered year round. Almost all optometry schools will accept OAT scores taken prior to the October that precedes the matriculation year. Check with individual schools for exact requirements, as they may vary.
- Example: for a student wishing to matriculate to optometry school in the fall of 2017, taking the OAT in September of 2016 or earlier is recommended.
- For many students, taking the OAT 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.
- Attempting the test for the first time later in the summer only gives you a single opportunity in a given application year, but may be the best option for some.

Contact (preferably in person) the faculty members and personal references who will complete the evaluation forms for you, and request that those be returned to the Health Professions Advising Office.

- Use the recommendation forms to request faculty and personal recommendations. Those forms can be found under the *2017 Applicants* tab of 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 optometrists you have shadowed, former employers, volunteer coordinators, etc. Do not ask an immediate family member for a letter of recommendation.
- Upon completion, letters should be returned:
 - ♦ As an attachment to PREHEALTHRECS@UA.EDU, or mailed to:
 - ♦ **Health Professions Advising, Letters of Recommendation**
Box 870268
Tuscaloosa AL 35487-0268.

Complete the UA Pre-Application, and return it to the Health Professions Advising Office

- The deadline for pre-application submission is March 30th. Those who submit pre-applications after August 15th cannot be guaranteed a committee interview with our office.
- A recent photo is required and must be included with the pre-application.
 - ♦ Most supplemental applications will require a recent photo, so it would be beneficial to have a handful of wallet-sized photos available. Ensure this photo is a headshot of you in professional/business casual attire. The goal is to present yourself as a mature, young professional.
- The Health Professions Advising Office WILL NOT conduct your committee interview without your pre-application and all of your letters or recommendation

Request a committee interview with the Health Professions Advising Office.

- Your UA interview WILL NOT be scheduled until you have submitted your pre-application and your recommenders have submitted their letters. However, the submission of your OPTOMCAS/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 during the month of MAY.
- 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 letters of recommendation sent to us with our own letter to create a composite evaluation, which is sent to the optometry schools.

Complete primary optometry school application(s) through OPTOMCAS.

- You must submit your primary applications to most optometry 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.
<http://www.optomcas.org/> will 'go live' for 2017 in July of 2016.
- 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 optometry 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 1.

Make arrangements to have your official transcripts sent directly to OPTOMCAS from the University Records Office.

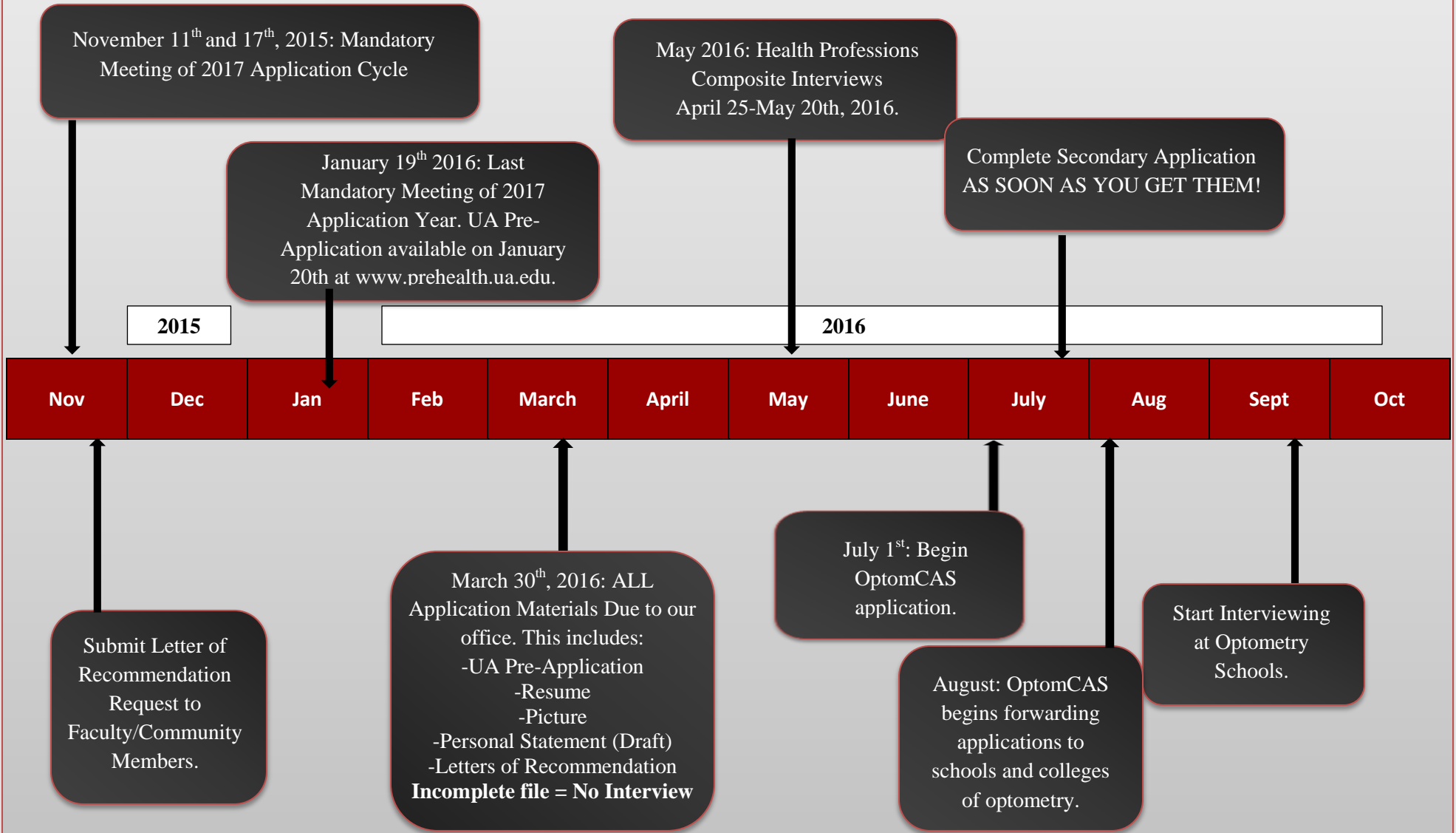
- Request your UA transcript online. Fees may apply.
<http://registrar.ua.edu/services/transcripts/>
- If you have transfer work, you must also have this transcript sent directly from each college/university. AP credit shows on your official UA transcript.
- **The Health Professions Advising Office does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

You will undoubtedly have questions about your application to optometry 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
2017 Optometry Applicant Timeline



Note: Dates are subject to change!

**REQUEST FOR A LETTER OF RECOMMENDATION
 UA HEALTH PROFESSIONS ADVISING OFFICE
 CYCLE 2017**

- ALLOPATHIC
- OSTEOPATHIC
- DENTAL
- TEXAS SCHOOLS
- OPTOMETRY

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 FACULTY EVALUATORS:** Transcripts indicate only final course grades. If this student was enrolled in one or more courses you instructed, please give additional information about his/her performance, including, if possible, approximate rank in the class, consistency of work, strengths and/or weaknesses in content or skill areas of the course(s).
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.***

Top Quartile	Second Quartile	Third Quartile	Bottom Quartile	No Recommendation

EVALUATOR SIGNATURE: _____ DATE: _____

TITLE/DEPARTMENT/CONTACT PH#: _____
 (attach business card if possible)

**PLEASE RETURN THIS FORM
 AND YOUR LETTER TO:**

OR SEND AS AN EMAIL ATTACHMENT TO:

HEALTH PROFESSIONS ADVISING
 BOX 870268
 TUSCALOOSA, AL 35487-0268
PREHEALTHRECS@UA.EDU

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