



An administrative fee of \$3 per school must be paid prior to the posting/ mailing of your packets. Payment may be made by personal check (payable to Brown University), unless you are an undergraduate and authorize the HCO to bill your student account—please indicate by checking the box:

Medical School List • Health Careers Office *(Do not fax or email this form)*

Name	BANNER ID	Class Year
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Place an X in the “send” box next to each school you are applying to. Maximum number of schools is 25 (no exceptions)

Institution Name	Send	HCO use only	Institution Name	Send	HCO use only
Albany Medical College			Mayo		
Albert Einstein			Medical College of Georgia		
Baylor			Medical College of Wisconsin		
Boston University			Medical University of South Carolina		
Brody - East Carolina			Meharry		
Brown			Mercer		
Case Western Reserve			Michigan State		
Charles R. Drew			Morehouse		
Cleveland Clinic Lerner College			Mt. Sinai		
Columbia			New York Medical		
Creighton			New York University		
Dartmouth			Northeastern Ohio		
Drexel			Northwestern		
Duke			Ohio State		
East Tennessee			Oregon Health and Sci. University		
Eastern Virginia			Pennsylvania State		
Emory			Ponce		
Florida State			Rosalind Franklin-Chicago Medical		
George Washington			Rush		
Georgetown			Saint Louis University		
Harvard			Sanford SoM-Un. of So. Dakota		
Howard			Southern Illinois		
Indiana			Stanford		
Jefferson			State Un. of New York Downstate		
Johns Hopkins			State Un. of New York Upstate		
Keck - USC			Stony Brook		
Loma Linda			Temple		
Louisiana - Shreveport			TMD SAS		
Louisiana - New Orleans			Tufts		
Loyola			Tulane		
Marshall			UMDNJ - New Jersey		

Institution Name	Send	HCO use only	Institution Name	Send	HCO use only
UMDNJ - Robert Wood Johnson			Un. of Missouri, Kansas City		
Uniformed Services University			Un. of Nebraska		
Un. of Alabama			Un. of Nevada		
Un. of Arizona			Un. of New Mexico		
Un. of Arkansas			Un. of North Carolina		
Un. at Buffalo			Un. of North Dakota		
Un. of California, Davis			Un. of Oklahoma		
Un. of California, Irvine			Un. of Pennsylvania		
Un. of California, Los Angeles			Un. of Pittsburgh		
Un. of California, San Diego			Un. of Rochester		
Un. of California, San Francisco			Un. of South Alabama		
Un. of Chicago			Un. of South Carolina		
Un. of Cincinnati			Un. of South Florida		
Un. of Colorado			Un. of Tennessee		
Un. of Connecticut			Un. of Toledo		
Un. of Florida			Un. of Utah		
Un. of Hawaii			Un. of Vermont		
Un. of Illinois at Chicago			Un. of Virginia		
Un. of Iowa			Un. of Washington		
Un. of Kansas			Un. of Wisconsin		
Un. of Kentucky			Vanderbilt University		
Un. of Louisville			Virginia Commonwealth		
Un. of Maryland			Wake Forest		
Un. of Massachusetts			Washington University (St. Louis)		
Un. of Miami			Wayne State		
Un. of Michigan			Weill - Cornell		
Un. of Minnesota, Minneapolis			West Virginia		
Un. of Minnesota, Duluth			Wright State		
Un. of Mississippi			Yale		
Un. of Missouri, Columbia					

Write in any schools NOT listed above. Place an X in the "send" box next to each school you have written in below

I hereby authorize and request the Health Careers Office to send my premedical packets to the schools listed above.

Signature	Date
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