Contact Information

.

Choose DO Explorer Survey
for the 2024-2025 Application Cycle

Section 1, Questions 1-19

Contact Information

Q1.

Your Contact Information *

First Name	
Last Name	
Title	
Email Address	
Phone Number (include area code)	

Q2.

College of Osteopathic Medicine (COM) *

Full COM Name	
COM Acronym	

Q3. **Campus Type as defined by COCA** *

○ Main Campus - a COM's primary location

○ Additional Location - offers the same programs as the main campus

○ Branch Campus - has distinct programs and admin oversight from the main campus

Q4. **Is your COM's address and contact information, including admissions office and contacts, EXACTLY the same as it appears in your existing DO**
Explorer listing? *

(if Yes is selected, you will skip to Q6)

○ Yes

○ No

Q5.

Complete your COM's Contact Information *

Main Campus Street Address	

Suite/Room/Building	
City	
State	
Zip Code	
Main Campus Phone	
COM Website	https://
Admissions Website	https://
Admissions Office Email	
Admissions Office Phone (include area code)	

Q6.

COM Social Media Site URLs *

(include the full URL i.e. https://....)

Facebook	
Instagram	
LinkedIn	
YouTube	
X (formerly Twitter)	
Other Social sites and their URLs	

Q7. **Do you have additional campus locations?** *

(if No is selected, you will skip to Section 2)

○ Yes

○ No

Q8. **Additional Campus "A" Contact Information**

Campus Name	
Campus Acronym	
Address	
Campus Website	
Campus phone	
Admissions Website	
Admissions email	
Admissions phone	

Q9. **Type as defined by COCA**

○ Main Campus - a COM's primary location

○ Additional Location - offers the same programs as the main campus

○ Branch Campus - has distinct programs and admin oversight from the main campus

Q10. **Campus Setting**

☐ Urban

☐ Suburban

☐ Rural

Q11. **Additional Campus "B" Contact Information**

Campus Name	
Campus Acronym	

Address	
Campus Website	
Campus phone	
Admissions Website	
Admissions email	
Admissions phone	

Q12. Type as defined by COCA

○ Main Campus - a COM's primary location

○ Additional Location - offers the same programs as the main campus

○ Branch Campus - has distinct programs and admin oversight from the main campus

Q13. Campus Setting

☐ Urban

☐ Suburban

☐ Rural

Q14. Campus "C" Contact Information

Campus Name	
Campus Acronym	
Address	
Campus Website	
Campus phone	
Admissions Website	
Admissions email	
Admissions phone	

Q15. Type as defined by COCA

○ Main Campus - a COM's primary location

○ Additional Location - offers the same programs as the main campus

○ Branch Campus - has distinct programs and admin oversight from the main campus

Q16. Campus Setting

☐ Urban

☐ Suburban

☐ Rural

Q17. Campus "D" Contact Information

Campus Name	
Campus Acronym	
Address	
Campus Website	
Campus phone	
Admissions Website	
Admissions email	
Admissions phone	

Q18. **Type as defined by COCA**

○ Main Campus - a COM's primary location

○ Additional Location - offers the same programs as the main campus

○ Branch Campus - has distinct programs and admin oversight from the main campus

Q19. **Campus Setting**

☐ Urban

☐ Suburban

☐ Rural

.

To save your answers and return later, click the 'next' arrow below before quitting.

COM Basics

.

Section 2, Questions 20-32

COM Basics

Q20.
Mission Statement*

○ Use the EXACT SAME text as in our current Explorer page.

○ Replace our Mission Statement with the text below:

```



```

Q21.
COM Description *

May include COM history, general description of campus goals, or other general information.

○ Use the EXACT SAME text as in our current Explorer page.

○ Replace our COM Description with the text below:

```



```

Q22. **Campus Setting** *

☐ Urban

☐ Suburban

☐ Rural

Q23. **Closest City / Additional Setting Details**

Q24. **Year COM Founded** *

Q25. **Type** *

○ Private Institution

○ Public Institution

Q26. **Status** *

○ Non-profit

○ For profit

Q27. **Current Accreditation Status** *

○ Use the EXACT TEXT from our current Choose DO Explorer page

○ Use the UPDATED text below:

Q28.

Institutional Affiliation *

List only parent universities. If none, please write None in first box.

1.

2.

3.

Q29. **Facilities** *

○ Use the EXACT TEXT from our current Choose DO Explorer page.

○ Use the UPDATED text below:

Q30.

Student Activities and Support Services *

i.e. Clubs, Interest Groups, Diversity Programs, Service Learning Opportunities, etc.

[ ]

Q31.
Student Residence Options *

○ Use the EXACT TEXT from our current Choose DO Explorer page.

○ Use the UPDATED text below:

[ ]

Q32.
2023-2024 Academic Year Enrollment *

Total medical school enrollment   [ ]

Total medical school male enrollment: [ ]

Total medical school female enrollment: [ ]

Total enrollment including affiliate institutions: [ ]

.

To save your answers and return later, click the 'next' arrow below before quitting.

COM Photos / Video

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Section 3, Questions 33-35

COM Photos and Video

Q33.
Select a photo option (Max 3 photos) *
Recommended dimensions 600 pixels wide by 400 pixels high. 300 dpi JPG or PNG, full color. Photos commonly used include images of the campus, facilities, students, etc.

○ Use the same photos currently on my COM's Explorer page.

○ I will upload photos to replace ALL photos currently on my COM's Explorer page. (only 3 photos allowed)

○ I will upload photos to replace SOME of the photos currently on my COM's Explorer page. Please explain:

[ ]

Q34.
Upload Photos (optional)

(300 dpi JPG, TIFF, or PNG, full color) Photos commonly used include images of the campus, facilities, students, etc.

. Photo 1

. Photo 2

. Photo 3

Q35.
Video option (1 video allowed)
If you wish to include a promotional video for your COM, please include EITHER the complete URL weblink (i.e. https://www.youtube.com/...) and/or the full embed code. <iframe>..

.

To save your answers and return later, click the 'next' arrow below before quitting.

Curriulum Options

.

Section 4, Questions 36-42

Curriculum

Q36.
Curricular Offerings *

○ Use the EXACT TEXT from our current Choose DO Explorer page.
○ Use the UPDATED text below:

Q37.
Does your college offer any Dual Degree and/or Concurrent Programs? *
(if Yes is selected, you will see Q38)

○ Yes
○ No

Q38. **Dual Degree / Concurrent Programs**
Please indicate the Dual Degree/Concurrent Programs your school offers.
Refer to your existing page in Choose DO Explorer to answer this question.

Degree Definitions:

BA - Bachelor of Arts
BS - Bachelor of Science
MHA - Master of Health Administration
MPH - Master of Public Health
MS - Master of Science
MSBS - Master of Science in Biomedical Sciences
PhD - Doctorate

Program Check		Description
☐	There have been no changes to our dual degree offerings for the 2023-2024 application cycle. Use our current Explorer listing.	
☐	Use our current Explorer dual degree data but remove the programs listed at right.	
☐	Use our current Explorer dual degree data and add the programs selected below:	
☐	BA or BS/DO	
☐	DO/MBA	
☐	DO/MHA	
☐	DO/MPH	
☐	DO/MS	
☐	DO/MSBS	
☐	DO/PhD	
☐	Other	

Q39.

Does your college offer Preparatory (including Postbaccalaureate) Programs? *
(if Yes, UPDATE is selected, you will see Q40)

○ No

○ Yes, use the EXACT SAME Preparatory Programs as in our current Explorer page.

○ Yes, UPDATE my preparatory programs as indicated below:

Q40.

2024-2025 Preparatory Programs*

Please list your school's individual preparatory programs and provide a brief description, or write NONE in the first row.

	Preparatory Program	Description
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Q41.

Does your college offer Special Programs? *

Please list any unique programs not listed in the Dual Degree/Concurrent Programs and Preparatory Programs sections.

(if Yes, UPDATE is selected, you must click through to Q42.)

○ No

○ Yes, use the EXACT SAME Special Programs as in our current Explorer page.

○ Yes, UPDATE my Special Programs as indicated below:

Q42. **2024-2025 Special Programs** *

Please list any unique programs not listed in the Dual Degree/Concurrent Programs and Preparatory Programs sections. Provide a brief description or write NONE in the first row. *Description ex*

Wellness Program: ATSU's flagship wellness program is for students who […]

	Special Program	Description
1.		
2.		
3.		

	Special Program	Description
4.		
5.		
6.		
7.		
8.		
9.		
10.		

.

To save your answers and return later, click the 'next' arrow below before quitting.

Admissions Processes

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Section 5, Questions 43-49

Admissions Processes

Q43.

How will your institution offer interviews during the 2024-2025 cycle? *

○ Virtual interviews only
○ In-person interviews only
○ Option to interview virtually or in-person

Q44.

What type of physician letter of recommendation will your COM require for the 2024-2025 Application Cycle? *

○ MD or DO
○ DO Only
○ N/A; no physician letter required

Q45.

Will you accept virtual shadowing in place of in-person shadowing? *

○ Will not require any shadowing
○ Only virtual shadowing accepted
○ Only in-person shadowing accepted
○ Will accept EITHER virtual or in-person shadowing

Q46.

Will your institution accept online coursework to fulfill prerequisite requirements for the 2024-2025 application cycle? *

○ No

○ Yes

○ Yes, but only in certain circumstances (please explain)

[text box]

Q47.

Will your institution accept pass/fail grades for prerequisite coursework for the 2024-2025 application cycle? *

○ No

○ Yes

○ Yes, but only in certain circumstances (please explain)

[text box]

Q48.

Will your institution waive MCAT exam requirements for applicants for the 2024-2025 application cycle? *

○ No

○ Yes

○ Yes, but only in certain circumstances (please explain)

[text box]

Q49.

Will your institution accept online lab coursework for the 2024-2025 application cycle? *

○ No

○ Yes

○ Yes, but only in certain circumstances (please explain)

[text box]

.

To save your answers and return later, click the 'next' arrow below before quitting.

Application Information

.

Section 6, Questions 50-63

Admissions Process & Application Information

Q50.

Write a brief overview of your admissions process. *

○ Use the EXACT TEXT from our current Choose DO Explorer page.

○ Use the UPDATED text below:

Q51.

First-Year Class Matriculant's Selection Factors *

○ Use the EXACT TEXT from our current Choose DO Explorer page.

○ Use the UPDATED text below:

Q52.

Primary Application Service *

○ AACOMAS

○ Other - Write In (Required):

Q53.

Earliest Application Submission Date *

○ Opening Date of AACOMAS (May 6, 2024)

○ [   ] Other - Write In (mm/dd/yyyy):

Q54. **Application Deadlines** *

Primary Application Deadline:

(mm/dd/yyyy)

Q55.

Supplemental Application Deadline *

(mm/dd/yyyy) or N/A if not applicable.

Q56.

Submission Timing for Best Consideration for the 2024-2025 Entering Class. *

Ex: For best consideration, applicants should submit their AACOMAS application at least four weeks prior to the deadline.

Q57.

Are international students considered for admission? *

(non-U.S. citizens or temporary residents)

(if No is selected, you will skip to Q59)

○ Yes

○ No

Q58.

Optional Details for International Students

○ Use the EXACT TEXT from our current Choose DO Explorer page.

○ Use the UPDATED text below:

Q59.

Are Deferred Action for Childhood Arrival (DACA) students considered for admissions? *

(if No is selected, you will skip to Q61)

○ Yes

○ No

Q60.

Optional Details for DACA Students

Q61.
Accepted Sources for Letters of Recommendation *
Select all that apply.

☐ AACOMAS
☐ Interfolio
☐ Paper
☐ Email

Q62. **MCAT** *

Oldest MCAT Considered:
(mm/dd/yyyy)

[   ]

Q63.
Latest MCAT Considered:
(mm/dd/yyyy)

[   ]

*

To save your answers and return later, click the 'next' arrow below before quitting.

Supplemental Application

*

Section 7, Questions 64-74

Supplemental Application

Q64.
Supplemental application required? *
(if No is selected, you will skip to Q73)

○ Yes
○ No

Q65.
Earliest Supplemental Application Submission Date *
(mm/dd/yyyy)

[   ]

Q66.
Supplemental Application Deadline *
(mm/dd/yyyy)

[   ]

Q67. **Supplemental Application Requirements** *

[Text box]

Q68.

Is a supplemental application fee waiver available? *

○ Yes

○ No

Q69.

Supplemental Application Fee Waiver Conditions *

[Text box]

Q70.

Supplemental application sent to the following prospective students: *

○ Use the EXACT TEXT from our current Choose DO Explorer page.

○ All Applicants

○ Screened Applicants - please include criteria (Required)

[Text box]

○ Other (Write In - Required)

[Text box]

Q71.

Supplemental Application Fee *

[Text box]

.

Optional Details:

Q72.

Supplemental application fee refundable? *

○ Yes

○ No

Q73.

Interview Format *

☐ Use the EXACT TEXT from our current Choose DO Explorer page OR select options below:

☐ Multi-Mini Interviews (MMI)

☐ Traditional

☐ Group

☐ Other (Explanation required)

.

To save your answers and return later, click the 'next' arrow below before quitting.

Premedical Coursework

.

Section 8, Questions 74-78

Premedical Coursework

Q74.

Entering Class Science & Non-Science Course Requirements *

(if EXACT Requirements is selected, you will skip to Acceptances)

○ Use the EXACT requirements shown in our current Choose DO Explorer listing.

○ Update our 2024-2025 Science & non-Science course requirements below.

Q75.

Science Courses *

Leave row blank if the course is neither required nor recommended.

	Required*	Recommended*	Lab*	Semester Hour
Anatomy	☐	☐	☐	
Biochemisty	☐	☐	☐	
Biology/Zoology	☐	☐	☐	
Cell/Molecular Biology	☐	☐	☐	
Chemistry (Inorganic)	☐	☐	☐	
Chemistry (Organic)	☐	☐	☐	

	Required*	Recommended*	Lab*	Semester Hour
Genetics	☐	☐	☐	
Immunology	☐	☐	☐	
Microbiology	☐	☐	☐	
Physics	☐	☐	☐	
Physiology	☐	☐	☐	

Q76.

Additional Science Courses

	Additional Science Course	Required*	Recommended*	Lab*	Semest
1.		☐	☐	☐	
2.		☐	☐	☐	
3.		☐	☐	☐	
4.		☐	☐	☐	
5.		☐	☐	☐	

Q77.

Non-Science Courses *

	Required*	Recommended*	Lab*	Semester Hours
College English	☐	☐	☐	
Behavioral Sciences	☐	☐	☐	
Math/Statistics	☐	☐	☐	

Q78.

Additional Non-Science Courses

	Additional Non-Science Course	Required*	Recommended*	Lab*	Semes
1.		☐	☐	☐	
2.		☐	☐	☐	
3.		☐	☐	☐	
4.		☐	☐	☐	
5.		☐	☐	☐	

To save your answers and return later, click the 'next' arrow below before quitting.

Acceptances

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<div align="center">

Section 9, Questions 79-84

Acceptances

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AACOMAS Traffic Guideline Schedule

Applicants will be requested to submit necessary matriculation documents, including a deposit, according to the following schedule:

- **Those accepted prior to November 15 will have until December 14.**
- **Those accepted between November 15 and January 14 will have 30 days.**
- **Those accepted between January 15 and May 14 will have 14 days.**
- **Those accepted after May 15 may be asked for an immediate deposit.**
- **After May 15 of the year of matriculation, each medical college may implement college-specific procedures for accepted students who hold at other medical colleges.**

Q79.
Do your acceptance/deposit deadlines conform to the AACOMAS Traffic Guidelines Schedule? *
(if Yes is selected, you will skip to Q81)

○ Yes

○ No

Q80.
If your acceptance and depost deadlines DO NOT conform to the AACOMAS Traffic Guidelines Schedule, outline the schedule when accepted app asked to submit necessary matriculation documents, including a deposit.*

Q81.
Earliest Acceptance Date *
(mm/dd/yyyy)

Q82. **Latest Acceptance Date ***
(mm/dd/yyyy)

Q83.
Deferred Entrance Requests Considered? *

○ Yes

○ No

.

Optional Details

[ ]

Q84.

Orientation / Start Date for First-Year Students for 2024-2025 Entering Class *

(mm/dd/yyyy)

[ ]

.

Optional Details

[ ]

.

To save your answers and return later, click the 'next' arrow below before quitting.

Early Decision Program

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Section 10, Questions 85-90

Early Decision Program

Q85.
Early Decision Program (EDP) offered? *
(If No is selected, you will skip to Tuition and Fees.)

○ Yes
○ No

Q86.
Early Decision Program available for: *

☐ In-state residents
☐ Out-of-state residents

Q87.
Early Decision Program Application Due Date *
(mm/dd/yyyy)

[ ]

Q88.
Early Decision Program Applications Submitted to: *

○ AACOMAS
○ TMDSAS
○ Other - Write In (Required):

[ ]

Q89.

Early Decision Program Supplemental Materials Due *

(mm/dd/yyyy)

[   ]

Q90.

Date Early Decision Program Applicants Notified *

(mm/dd/yyyy)

[   ]

.

To save your answers and return later, click the 'next' arrow below before quitting.

Financial Information

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Section 11, Questions 91-106

Tuition, Fees and Financial Aid

We recommend you check with your Financial Aid office to complete this section.

If you need to quit the survey now to consult with finance before continuing, your answers to the previous sections have already been automatically s

Q91.

2024-2025 Annual In-State Tuition *

[   ]

Q92.

2024-2025 Annual Out-of-State Tuition *

[   ]

Q93.

2024-2025 Annual In-State Fees *

[   ]

Q94.

2024-2025 Annual Out-of-State Fees *

[   ]

Q95.

2024-2025 Annual Health Insurance Fee *

[   ]

Q96.

Fees Include *

Check all that apply.

☐ Computer

☐ Health Service

☐ Lab

☐ Microscope Rental

☐ Student Activities

☐ Student Services

☐ Technology (not computer)

☐ Other

[text area]

Q97.

Estimated annual room, board, books and living costs *

[text field]

Q98.

Average 2023 Graduate Indebtedness *

[text field]

Q99.

Acceptance Deposit *

[text field]

.

Optional Comments

[text area]

Q100.

Additional deposit amount *

Enter $0 if none.

[text field]

.

Optional Comments

[text area]

Q101.

Deposit applied to tuition? *

○ Yes

○ No

○ Partially - Please explain (Required):

[text area]

Q102.

Deposit refundable? *

○ Yes

○ No

○ Partially - Please explain (Required):

```


```

.

Financial Aid

Q103.

Financial Aid Website *

Include full URL (i.e. https://...)

```

```

Q104.

Percent of enrolled students with federal financial aid *

| 0 | %

Q105.

Does your COM offer scholarships? *

(if Yes is selected, you will skip to Q106)

○ Yes

○ No

Q106.

Average annual scholarship/grant per student *

```

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Your survey is complete!
Please click the 'next' arrow to submit it to AACOM.