



American University of the Caribbean
School of Medicine

Request for MSPE LETTER

(please allow 3–4 weeks for processing)

Request Date: _____ Student or AUC Graduate: _____

The following CONTACT INFORMATION is required to avoid delays:

Your Name: _____

Your Phone #: _____

E-mail Address: _____

Your Address _____
Street City State Zip Code

The following IDENTIFICATION NUMBERS, SCORES (or scheduled test dates) and attendance DATES are required to avoid delays:

AUC Student ID#: _____

AAMC # (for ERAS): _____

AUC Start Date: _____

Graduation Date: _____

	3-digit	2-digit	Date
USMLE Step 1: _____			
USMLE Step 2 CK: _____			
USMLE Step 2 CS (Pass/Fail): _____			

Note: a non-passing score is listed on letter as pending

Important Notice to ERAS Applicants about Letters of Recommendation (LoR): Please have those letters sent directly to ECFMG/ERAS along with a copy of the ERAS Document Submission Form and the ERAS LoR Cover Sheet.

The following DOCUMENTS are required in order to process your MSPE Letter:

Curriculum Vitae (resumé) _____

Unique Characteristics Questionnaire _____

Payment (check or credit card) _____

Please indicate NUMBER OF MSPE LETTERS to be sent to each recipient:

To ECFMG/ERAS/EFDO _____

To Student/Applicant (Hardcopy) _____
(to address at top of form)

To Student/Applicant _____
(free e-mail copy)

To Other Recipient 1: _____

Recipient Name 1: _____

Hospital Name: _____

Recipient Address: _____

To Other Recipient 2: _____

Recipient Name 2: _____

Hospital Name: _____

Recipient Address: _____

Non-refundable fees:	Students	Graduates
Fee (per letter)	\$ 10.00	\$ 15.00
x Total # of Letters _____		
= Total Amount Due _____		

If paying with a CHECK, you will need to mail all forms and documents along with your check:

Make checks payable to: **AUC**

Mail to:

Assistant Registrar/MSPE

Medical Education Administrative Services

901 Ponce de Leon Blvd., Suite 700, Coral Gables, FL 33134

If paying with a Credit Card, you may fax all to (305) 444-6791, or scan and e-mail all to spino@aucmed.edu:

Credit Card Type: _____ **Payment Amount:** _____
 (Visa or MC only)

Credit Card #: _____ Expiration Date: _____

CVC Security Code: Please enter your Credit Card's CVC Security Code at the bottom of this page. Once an approval authorization is received from your credit card company, this information will be cut out and shredded.

Credit Card Billing Address _____
 (required, even if same as above)

Name of Student/Applicant _____ Name on Card _____
 (please print)

Authorizing Signature _____ Today's Date: _____
 (required)

FOR OFFICE USE ONLY:

Date Received: _____ Received by: _____

Authorization Number: _____

CVC Security Code: _____
 (located on the back of your credit card)

MSPE Letter Questionnaire

Name: _____

Please answer the following questions as they pertain to your time in medical school.
Please indicate the dates and/or time periods for each item.

- 1. Have you received any honors or awards? If so, which ones and for what reason?**

- 2. What (other) accomplishments have given you a sense of pride or satisfaction?**

- 3. Tell me about some of the challenges/obstacles you've had to overcome.**

- 4. Have you been involved in any research? If so, tell me about the research and your role in it.**

- 5. Have you done any teaching or tutoring? If so, who and what did you teach and what were the results?**

- 6. Have you done any volunteer work or community service? If so, what did you do and why did you do it?**

- 7. Have you taken on any leadership roles? If so, tell me what you did and what you learned from it.**

- 8. What were some of your favorite medical school experiences and why?**

- 9. What (else) have you done to distinguish yourself from your medical school peers?**

- 10. What are your goals? What is it that inspires you to achieve them?**

- 11. Is there something special about your background or general makeup that makes you uniquely qualified for what you want to do?**

- 12. If you already have graduated, please tell me what you have been up to since medical school.**