

MedEdits Medical Admissions

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Residency Application Planning Worksheet

Organize everything you will need before you open MyERAS

I built this worksheet so you can gather and shape your residency application material before you even log in to the application. We find that when students take the time to work on their materials offline first, they write from intention and focus. The goal is to take your time, don't rush, and create the most thoughtful and considered materials you possible can.

We suggest you work through this in pencil. Cross things out. The point is to think clearly now so that what you eventually enter is deliberate.

Dr. Freedman's note Wherever you see one of these boxes, I am flagging something important or key points to consider as you work on your application. This is the standardized application that is sent to all programs and specialties you apply to. Keep in mind that the residency personal statement is a distinct entity and you should write a different one for each specialty you apply to. You will have the opportunity to assign specific personal statements to be sent to specific programs. Learn more about the residency personal statement: <https://mededits.com/mededits-resources/residency-admissions/residency-personal-statement/>

A note on what this is

This is an independent MedEdits resource created to help you prepare your thinking. It is not produced, endorsed by, or affiliated with the AAMC, ERAS, MyERAS, or the NRMP. Always complete and certify your actual application inside the official system, and confirm current requirements, character limits, and deadlines there, since those details change each cycle.

1. Personal and Contact Information

Have these details consistent across every part of your application and your letters.

Full legal name	<i>first, middle, last, suffix</i>
Preferred name	
Pronouns	<i>optional</i>
Email	<i>the address you will check daily all season</i>
Phone	<i>best number to reach you</i>
Current mailing address	
Permanent address	<i>if different from current</i>
AAMC ID	

Dr. Freedman's note Use one email for the entire cycle and check it relentlessly. Interview invitations often arrive with very short windows, interview slots can fill quickly and a missed message can cost you a spot.

2. Work Authorization and Eligibility

Programs need to understand your ability to train in the United States for the full length of the program.

☐ Authorized to work in the U.S. ☐ Will require visa sponsorship

Basis for authorization	<i>citizen, permanent resident, EAD, visa type, etc.</i>
Visa type, if applicable	<i>for example J-1 or H-1B</i>
State / province of residence	

Dr. Freedman's note If your situation involves sponsorship, confirm which visa each target program actually supports before you spend a signal or an application fee on it. This single step saves applicants real money and avoids dead ends.

3. Identification and Registration Numbers

USMLE / ECFMG ID	
NBOME ID	<i>D.O. applicants</i>
AOA member number	<i>D.O. applicants</i>

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NRMP ID	<i>register with the NRMP separately</i>
Specialty-specific match ID	<i>for example urology, if applicable</i>

Dr. Freedman's note Registering for the application does not register you for the Match. They are two separate systems with separate deadlines. Put both on your calendar today. RELATED READING: Residency Match: How it Works and How to Get Matched: <https://mededits.com/mededits-resources/residency-admissions/residency-match/>

4. Background Details

Self-identification

This section is optional. Complete it only if you choose to, following the categories in the official application.

Language fluency

List languages other than English in which you can hold a substantive conversation. Use a simple scale as you draft.

Rough scale to sort yourself: Native or near-native, Advanced, Conversational, Basic. The official form uses its own definitions, so confirm them there before you finalize.

Language	your honest level
Language	your honest level
Language	your honest level

Dr. Freedman's note Claim only what you could actually use with a patient under pressure. Overstating clinical-level fluency is a credibility risk if it surfaces in an interview.

Military and service obligations

☐ Active duty obligation or deferment ☐ Reserve, public health, or state program obligation ☐ None

If yes, note the branch or program and years remaining:

5. Geographic and Setting Preferences

Some specialties let you signal where and in what kind of setting you would like to train. Decide whether you have a genuine preference before you answer.

Geographic preference

If you list specific regions, generally only programs in those regions see your answer. If you state no preference, all your programs see that. If you skip it, no one sees anything. Choose deliberately.

Region 1	<i>and a sentence on why</i>
Region 2	
Region 3	

Why this region matters to me (keep it specific and honest):

Setting preference

Quick gloss as you decide: urban means dense city core with public transit and mostly non-agricultural work; suburban means residential areas around a city, usually needing a car; rural means low density, open land, private vehicles required, often agriculture or resource based.

Confirm the official wording before you commit.

☐ Urban ☐ Suburban ☐ Rural ☐ No preference

In a sentence, why:

Dr. Freedman's note A geographic preference reads as authentic only when there is a real reason behind it, such as family, a partner, ties to a community, or training you cannot get elsewhere. Tie your answer to something concrete in your life, rather than a vague impression of a city.

6. Education

Higher education

Each undergraduate or graduate program you attended. Most graduates of international medical schools will mark this section as not applicable for the U.S.-style undergraduate degree.

Institution	
Degree and field	
Dates attended	<i>from / to</i>
Degree earned or expected	

Institution	
Degree and field	
Dates attended	<i>from / to</i>
Degree earned or expected	

Medical education

Medical school	
Country	
Degree	<i>for example M.D. or D.O.</i>
Degree month and year	
Dates of education	<i>from / to</i>

7. Postgraduate Training

Any current or prior residency or fellowship. Mark as none if this is your first.

☐ None

Type of training	
Specialty	
Institution / program	
Location	
Program director	
Supervisor	
Dates	from / to

Dr. Freedman's note If you have prior training, plan your explanation before anyone asks. A clean, non-defensive account of why you moved is far stronger than a story that sounds rehearsed or aggrieved.

8. Academic or Professional Interruptions

This section is not about your health, disability, or family status. It asks about gaps tied to repeated or remediated coursework, or to professionalism actions.

☐ I have a gap or extension to explain ☐ Not applicable

If applicable, draft a short account: what happened, when, what you did about it, and what you took from it.

Dr. Freedman's note Programs value when applicants take responsibility for their actions and demonstrate growth. State the facts plainly, then spend most of your words on what changed because of it.

9. Experiences

This is the heart of the application and where most applicants underinvest. You can list up to ten experiences that show who you are, what you care about, and what matters to you. Draft all of them here first, then decide which deserve the most attention.

Dr. Freedman's note Do not simply restate duties. For each experience, try to include why the experience was important to you or what you learned from it. The entries that show judgment, initiative, or genuine investment are the ones a reader remembers.

Experience 1

Organization	
Experience type	<i>research, work, volunteer, leadership, teaching, etc.</i>
Position / title	
Dates	<i>start – end (or check if ongoing)</i>
Location	<i>city, state, country</i>
Hours / frequency	
Focus area	<i>the theme this experience speaks to</i>

What I did and why it mattered (aim for roughly 750 characters):

Experience 2

Organization	
Experience type	<i>research, work, volunteer, leadership, teaching, etc.</i>
Position / title	
Dates	<i>start – end (or check if ongoing)</i>
Location	<i>city, state, country</i>
Hours / frequency	

Focus area	<i>the theme this experience speaks to</i>
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What I did and why it mattered (aim for roughly 750 characters):

Experience 3

Organization	
Experience type	<i>research, work, volunteer, leadership, teaching, etc.</i>
Position / title	
Dates	<i>start – end (or check if ongoing)</i>
Location	<i>city, state, country</i>
Hours / frequency	
Focus area	<i>the theme this experience speaks to</i>

What I did and why it mattered (aim for roughly 750 characters):

Experience 4

Organization	
Experience type	<i>research, work, volunteer, leadership, teaching, etc.</i>
Position / title	
Dates	<i>start – end (or check if ongoing)</i>
Location	<i>city, state, country</i>
Hours / frequency	
Focus area	<i>the theme this experience speaks to</i>

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What I did and why it mattered (aim for roughly 750 characters):

Continue on additional copies of this page for experiences 5 through 10. Keep your strongest material near the top.

10. Most Meaningful Experiences

Choose up to three of the experiences above to mark as most meaningful. For each, the task is to reflect on the value of the experience and to show insights about it. Write about why it mattered and how it changed you, the impact you had, and weave in the focus area you assigned it if applicable.

Dr. Freedman's note The trap here is repeating the activity description with warmer adjectives. Reflection means showing a shift in how you think, what you value, or how you practice. Aim for the insight only you could have written. Keep each to roughly 300 characters.

Meaningful experience 1

Meaningful experience 2

Meaningful experience 3

11. Impactful Experiences

This optional section invites you to share challenges or circumstances that shaped your path to residency and are not captured elsewhere. It is not expected of every applicant, and you should not repeat your personal statement here.

Areas applicants sometimes draw on include family or financial background, the community you grew up in, limits on educational access, or major life circumstances. Write only what you are comfortable having a stranger read.

Dr. Freedman's note You are not required or expected to complete this section. Does this genuinely belong to your journey and is not written about elsewhere in your application, or are you reaching because the box exists? An empty box is fine. Second, does it add something the rest of your application does not already show? If both answers point to yes then complete this section.

Draft (roughly 750 characters):

12. Hobbies and Interests

Real interests make you a person an interviewer wants to talk to. Specific beats generic.

Dr. Freedman's note "Reading and travel" tells a reader nothing. The hobby that sparks an actual conversation in an interview is specific or slightly unexpected and one that you can talk about with enthusiasm.

13. Licenses, Certifications, and Registrations

State medical licenses

☐ None

State	
License type and number	
Expiration	

DEA registration

DEA number	<i>if applicable</i>
Expiration	

Board certifications

☐ Board certified ☐ Not applicable

Certifying board	
Certification	
Other health-care certifications	<i>for example BLS, ACLS, with dates</i>

14. Additional Background Questions

The application includes several yes or no questions about your ability to perform the duties of training and about your professional and legal history. Note your honest answers here, and prepare a brief written explanation for any yes.

☐ Able to perform the responsibilities of the role, with or without accommodation

Has a medical license ever been suspended, revoked, or surrendered?

☐ Yes ☐ No

Have you been named in a malpractice case?

☐ Yes ☐ No

Is there anything that would limit licensure or hospital privileges?

☐ Yes ☐ No

Misdemeanor conviction in the United States?

☐ Yes ☐ No

Felony conviction in the United States?

☐ Yes ☐ No

If any answer is yes, draft your explanation here:

Dr. Freedman's note Answer these completely and accurately. If something requires explanation, write it calmly and factually, and have a trusted advisor read it before it goes anywhere near the live form. Inconsistency or omission is far more damaging than the underlying fact.

15. Scholarly Work

Capture every publication, abstract, and presentation in a consistent format so you are not scrambling later. You may flag your three most meaningful works in the application.

Publications and abstracts

Type	<i>journal article, abstract, book chapter</i>
Title	
Authors	<i>last name, first and middle initials; note if you are first author</i>
Publication and status	<i>submitted, accepted, in press, published</i>
Year / volume / pages / PMID	

Presentations

Type	<i>oral or poster</i>
Title	
Authors / presenters	
Meeting and date	
Location	

Dr. Freedman's note Use the same citation format every time and confirm each entry against the source. Reviewers in research-heavy specialties notice sloppy or inflated citations immediately, and it undermines the rest of your file.

16. Specialty Question Preparation

Several specialties ask their own short essay questions inside the application, and the exact prompts vary by specialty and by cycle. Confirm your specialty's current prompts in the official system, then draft here.

Across specialties, these prompts tend to circle a few themes. Prepare a strong, specific story for each so you are ready whatever the exact wording:

- A difficult decision in a complex situation, and what you learned
- A setback or adversity, and how you responded
- Difficult or negative feedback, and how you adjusted
- A team disagreement, and how you contributed to the resolution
- A heavy workload, and how you managed it

Draft notes for your specialty's prompts:

Dr. Freedman's note Reuse the same handful of real stories across these prompts rather than inventing a new one each time. Pick experiences with a clear decision, a visible action you took, and a concrete result. Vague hypotheticals are forgettable.

17. Program Signal Planning

Many specialties let you send a limited number of signals to express genuine interest, sometimes in tiers. The number of signals and the rules change every cycle, so look up your specialty's current allotment in the official source and record it here before you plan.

My specialty	
Signals available this cycle	<i>confirm the current number and any tiers</i>
Tier rules, if any	

Rank where your signals will go, strongest interest first:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Dr. Freedman's note The number of signals for some specialties are scarce, so spend them where they change the math. Sending one to a program that would already rank you highly, or to one that is far out of reach, wastes the signal. Aim them at programs where genuine, demonstrated interest could tip a real decision.

18. Before You Certify and Submit

When you move your material into the live application, slow down for these final checks. Certifying is binding, and accuracy is your responsibility.

- ☐ Every section is complete and every entry is accurate.
- ☐ Names, dates, and citations are consistent across the whole application.
- ☐ Character limits and current-cycle requirements confirmed in the official system.
- ☐ Your own writing is genuinely your own; any tools were used only for brainstorming or editing.
- ☐ Letters and any required documents are accounted for.
- ☐ Both your application and your Match registration are complete, where applicable.
- ☐ A trusted advisor has read anything sensitive before submission.

When you certify in the official system, you are attesting that everything is complete, accurate, and your own work. Read that attestation carefully there before you agree to it.

You have the material. Now make it deliberate.

And when you want a physician's eyes on your application before any program sees it, that is exactly what we do.

Schedule a free 15-minute consultation: info.mededits.com/free-consultation

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