Pathway Directors, or their designee, are expected to follow-up with all Pathway students individually at least once in the Fall of the Senior year to:

1) Review 4th year schedules to assure graduation requirements will be met and
2) Advise students individually regarding their Residency Interviews (i.e. assure adequate number of interviews, range of programs, answer questions regarding interview process, etc.)

Student Name: ___________________________ Student Drexel E-Mail: ________________
Pathway Selected: ___________________________ Student Telephone #: __________________

Dates of Advising: _______________________________________________________________________

☐ Individual advising in person  ☐ Individual advising via telephone  ☐ Individual advising via ___________

**Interview Information:**
Number (#) of Interviews currently scheduled:

- # Categorical ___________________________ Name of Specialty(s)
- # Advanced ___________________________ Name of Specialty(s)
- # Preliminary/Transitional

Number (#) of Programs pending response (Do not include those programs rejected from):

- # Categorical ___________________________ Name of Specialty(s)
- # Advanced ___________________________ Name of Specialty(s)
- # Preliminary/Transitional

☐ Student may be at risk for matching. Additional programs and/or Alternate plans discussed.
☐ Student referred to the Dean for Student Affairs and/or Career Development Center for additional advising.

Comments/Concerns:______________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

Advising provided by (Please print): __________________________________________________________
Printed Name and Pathway Director Signature: _________________________________________________

*For students in the MD/PhD Pathway, Research Pathway or Women’s Health Pathway only:

Students in these Pathways are required to seek additional advising and sign-off from the Pathway Director in the specialty they are applying for residency in.

Comments/Concerns:______________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

*Printed Name/Signature of Pathway Director in specialty student plans to pursue Date

**Must be completed by October 31, 2017 for the following Specialties:** Anesthesiology, Child Psychiatry, Child Neurology, Family Medicine, Neurosurgery, Obstetrics & Gynecology, Ophthalmology, Pediatrics, Urology

**November 17, 2017 for all other Specialties:** Dermatology, Emergency Medicine, Internal Medicine, Med-Peds, Neurology, Orthopedic Surgery, Otolaryngology, Pathology, Plastic Surgery, PM&R, Psychiatry, Radiation Oncology, Radiology/IR, Surgery, Thoracic Surgery, Vascular Surgery

Return Forms to: Veronica Bosier, Fax: 215-843-1766 or via Email to: medstudentaffairs@drexel.edu
DUCOM, Office of Student Affairs & Career Advising, 2900 W. Queen Lane, Room 221, Philadelphia, PA 19129 – (20171016)