

## Request for Reconsideration Form

*(Please Note: Directions are provided on page 4)*

### **Please type or clearly print responses to the following:**

1. Name: \_\_\_\_\_

2. AAMC ID # (if available): \_\_\_\_\_

3. Address: \_\_\_\_\_

4. City, State, Zip: \_\_\_\_\_

5. Telephone Number: \_\_\_\_\_

6. E-mail address: \_\_\_\_\_

7. Nature of your impairment (check all that apply):

\_\_\_\_\_ Learning Disability

\_\_\_\_\_ ADHD

\_\_\_\_\_ Psychiatric Disorder (e.g., Anxiety Disorder, Depression, OCD)

\_\_\_\_\_ Physical Disability (e.g., visual impairment, hearing impairment, mobility impairment, chronic medical conditions)

\_\_\_\_\_ Other: \_\_\_\_\_

8. If your request for accommodations was not approved because of insufficient or incomplete documentation, such as missing components from a psychoeducational/neuropsychological assessment, you were informed about these missing components in your letter from us. Please explain where these missing components can be found (or attach new or updated evidence):

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9. Date of your most recent comprehensive psychoeducational/neuropsychological evaluation:  
\_\_\_\_\_

10. Regarding your evaluator:

Name: \_\_\_\_\_

Doctoral degree in which field: \_\_\_\_\_

Doctoral degree earned in what year: \_\_\_\_\_

Describe your evaluator's experience in evaluating *adults*: \_\_\_\_\_

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**Please ask your evaluator to help you complete items 11-14:**

11. For requests related to Learning Disabilities, ADHD, and psychiatric disorders:

List the names and results of the tests used to satisfy the Exclusionary Criteria (described in the Documentation Requirements), such as measures of social, emotional, and behavioral functioning:

Test: \_\_\_\_\_ Result: \_\_\_\_\_

Test: \_\_\_\_\_ Result: \_\_\_\_\_

Test: \_\_\_\_\_ Result: \_\_\_\_\_

Test: \_\_\_\_\_ Result: \_\_\_\_\_

12. For requests related to Learning Disabilities and/or ADHD:

List the test names and Standard Scores (mean=100) of the untimed achievement tests (reading, written language, math) that were administered:

Test: \_\_\_\_\_ Score: \_\_\_\_\_ Test: \_\_\_\_\_ Score: \_\_\_\_\_

Test: \_\_\_\_\_ Score: \_\_\_\_\_ Test: \_\_\_\_\_ Score: \_\_\_\_\_

Test: \_\_\_\_\_ Score: \_\_\_\_\_ Test: \_\_\_\_\_ Score: \_\_\_\_\_

*Remember that tests should be scored using age-norms unless unavailable from the test manufacturer.*

13. For requests related to Learning Disabilities and/or ADHD:

List the test names and Standard Scores (mean=100) of the timed achievement tests (reading, written language, math) that are below the Average range (below 90):

Test: \_\_\_\_\_ Score: \_\_\_\_\_ Test: \_\_\_\_\_ Score: \_\_\_\_\_

Test: \_\_\_\_\_ Score: \_\_\_\_\_ Test: \_\_\_\_\_ Score: \_\_\_\_\_

Test: \_\_\_\_\_ Score: \_\_\_\_\_ Test: \_\_\_\_\_ Score: \_\_\_\_\_

*Remember that tests should be scored using age-norms unless unavailable from the test manufacturer.*

14. For requests related to Learning Disabilities:

List the test names and Standard Scores (mean=100) of the tests of processing abilities that were administered, that are clearly related to the areas of significant underachievement (WAIS-3 subtests may NOT be the only tests of processing abilities):

Test: \_\_\_\_\_ Score: \_\_\_\_\_ Related to area of underachievement: \_\_\_\_\_

Test: \_\_\_\_\_ Score: \_\_\_\_\_ Related to area of underachievement: \_\_\_\_\_

Test: \_\_\_\_\_ Score: \_\_\_\_\_ Related to area of underachievement: \_\_\_\_\_

*Remember that tests should be scored using age-norms unless unavailable from the test manufacturer.*

Name of examinee: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## Request for Reconsideration for MCAT Accommodated Testing

### Reconsideration Instructions

If your request for accommodations was not approved, you have the option of asking for a reconsideration. In most cases, your request for reconsideration should include new information, such as new test results. A letter of appeal written by yourself or your doctor will not result in a reconsideration.

**In order to have your request reconsidered, follow these three steps:**

- 1. Complete pages 2-4 of this form. You may wish to consult your doctor or evaluator for assistance in completing portions of this form.**
- 2. Have your evaluator complete and sign the *Checklist for Evaluators* form.**
- 3. Return both forms to our office. The address is at the bottom of this page.**

Please keep in mind that the most common reasons for not approving accommodations are:

- 1) Incomplete or insufficient documentation, especially reports of psychoeducational/neuropsychological testing that did not include all of the required components of a comprehensive evaluation, as outlined in the Documentation Requirements on the website;
- 2) Evidence of average to above-average educational performance, *compared with the average person in the general population, without* accommodations. Although most evaluators use a “discrepancy model” (IQ vs. achievement) when determining if you have a cognitive disability like a learning disability, the Americans with Disabilities Act (ADA) standard is to compare your functioning to that of the average person in the general population. *This may be different than the standard used to evaluate your request for accommodations in college or prior to college.*

Requests for reconsideration may, at the discretion of the Director of Accommodations Review, be forwarded to an external reviewer who is an expert in the field in which you claim to have a disability. Your documentation will be kept strictly confidential. We may, at the discretion of the Director of Accommodations Review, release to the applicant portions of the external reviewer’s analysis. We do not release the name or contact information of the external reviewer.

Upon completion of our reconsideration, you will be informed in writing of our decision.

Please remember that it may take up to 30 days to review your request for reconsideration.

**Association of American Medical Colleges  
Attn: Saresa Davis, Mailroom Supervisor  
MCAT Office of Accommodated Testing Services  
2450 N Street, NW  
Washington, DC 20037**