

# SF Match 2011-2012

## Adult Hip & Knee/Tumor Fellowship Central Application Service (CAS) Instruction Manual

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## OVERVIEW

The Central Application Service (CAS) is a service provided through the San Francisco Matching Program (SF Match) that distributes applications to training programs. Applicants pay an additional fee for this service. The use of CAS assures that applications are uniform, complete and distributed in an orderly fashion.

**CAS is limited to distribution services.** We do not evaluate your credentials nor do we determine eligibility to apply to participating programs.

The use of CAS is mandatory when applying for the Adult Hip & Knee/Tumor Fellowship Match. Visit the SFMatch website fellowship page for Adult Hip & Knee/Tumor to register and access the program directory.

### The Applicant's Responsibility

The CAS procedure requires you (the applicant) to be responsible for gathering ALL support documents. You are **REQUIRED** to submit the following documents to consider your application COMPLETE:

- CAS Distribution choices & Payment (**On-line Submission**)
- CAS Application Form (**On-line Submission**)
- Medical School Transcript(s)
- USMLE Scores or equivalent score reports
- ECFMG Certificate (applicable to International Graduates)
- Three (3) letters of reference
- Updated C.V.

Once the necessary documents have been gathered (Dean's/MSPE Letter can be submitted when available, if you are currently a US Senior), send all documents to us in **ONE PACKAGE**. We then process and distribute your application to the programs listed on your CAS Distribution List. With the exception of forms submitted online, you must mail all documents in **ONE PACKAGE** to:

### SF MATCH

**CAS for Adult Hip & Knee/Tumor Fellowship**  
**655 Beach Street, San Francisco, CA 94109**

### PROCESSING TIME

During peak processing times, it takes up to three (3) weeks for your documents to be processed and distributed to the programs. **COMPLETE** applications will be processed and distributed in the order in which they are received. **INCOMPLETE** applications will be held until all required documents have been received.

## CAS TARGET DATES AND DEADLINES

CAS does not set deadlines. We will process and distribute your application up until the match deadline. We do suggest, however, that you submit your application to our office before the following TARGET date:

◆ Central Application for Adult Hip & Knee/Tumor Fellowship → Mon., October 3, 2011

**Please note that this TARGET date is NOT A DEADLINE.**

## PROGRAM DEADLINES

Most training program deadlines are listed in the program directory. If a program's deadline is unlisted, please contact the program directly. For best results, submit the complete CAS application three (3) weeks prior to the earliest deadline you would like to meet. CAS does not stop processing applications because a program's deadline has passed. A complete CAS application will be distributed to all programs you request no matter how late it arrives (prior to rank list deadline). It is important to note, however, that applications that arrive to the programs after their deadline may not receive the same priority from the programs' review committees as applications received on time.

## DESCRIPTION OF REQUIRED DOCUMENTS

**IMGs sections are for International Medical Graduates.**

### CAS Application Form

The CAS form is available online in your SF Match account profile. Click the "CAS Application" link to find the form. The CAS application form is savable. Be certain to check your data prior to submitting the application form by selecting the "Preview" button. When the form has been completed, select the "Submit" button. Please note: After the form has been submitted, it will be converted to PDF format so programs can view the application in a standardized format. We include a recommended character limit listed next to each box. Because the data is transferred to PDF, there is also a line limitation. No substitutions/corrections can be made once your application has been distributed to programs. Please use the "Preview" button to ensure no text is omitted, or edit appropriately. You must communicate any mistakes you discover on your application after distribution to programs directly.

### MEDICAL SCHOOL TRANSCRIPTS

Provide an official or copy of your Medical School Transcript. If you have attended more than one medical school, include the additional transcripts with your application.

**IMGs** → You do not need to provide the original transcript if doing so is too difficult. A legible **8 1/2" x 11"** photocopy is acceptable. All transcripts must be submitted in English, translated copies must be professionally notarized. **DO NOT** send copies of your non-translated transcript, as they cannot be distributed. If your school does not provide transcripts (list of all courses taken, grades and dates), you

may submit a copy of your translated diploma.

### **USMLE SCORES & PERFORMANCE PROFILE**

You will need to provide us with your USMLE Step I, Step 2 and Step 3 Score Reports/Transcripts. If available, please include the performance profiles page listed on the back of the original score reports. A clear photocopy (8 ½” x 11”) of your original student score report with the performance profile is acceptable. If your original report is not available you will need to request a transcript from the USMLE (subsequent official transcript will not include the performance profiles and they are not required by CAS). If you did not take the USMLE, but previously passed an equivalent exam (i.e. NBME, Flex or VQE), include copies of these instead.

### **LETTERS OF REFERENCE**

You must submit three (3) ORIGINAL letters of reference for review by the programs. **No more, No less.** It is recommended that residency applicants provide one letter from a **Residency Training Program Director**. If you have requested a confidential letter, please indicate so on your CAS application and ask the author to return the letter to you in a sealed envelope. **DO NOT** open the sealed envelopes. Non-confidential letters can be included in your application open faced.

**IMGs** → We understand that, at times, it is very difficult to obtain original letters of reference from overseas. For this reason, we do accept photocopies of the original letters. Photocopied letters will be marked as “copy” and may need to be explained at an interview. All letters must be submitted in English on **A4 or 8 ½” x 11”** paper. Translated copies must be professionally notarized.

**NOTE:** Letter writers can address their letters to either “Dear Program Director” or “Dear Review Committee”.

### **ECFMG CERTIFICATE (applicable to IMGs only)**

International Medical Graduates must provide copy of valid ECFMG certificate.

### **CV**

Provide a copy of your updated C.V. Please do not attach photo with C.V.  
Below is the suggested format:

**Curriculum Vitae (Suggested Format)**  
Name (in full), degree

**Date** (Month, Day, Year)

**Contact Information**

- Address
- Phone Number
- Fax Number
- Email
- Foreign Languages (native, fluent, proficient, or working knowledge)

**Education**

- List chronologically all undergraduate and graduate education
- Include name of degree, date awarded, name of institution, location and major

**Post Graduate Education and Training**

- List chronologically all training positions (internships, residencies, post doctoral fellowships, etc.) Include date, institution and mentor (if applicable) for each position

**Certifications** (If applicable)

- List all board and/or subspecialty certifications with year received

**Medical Licensures**

- List all medical and/or other state/federal licensures with year issued and status (*active or inactive*).

**Military Service** (If applicable)

- Provide rank, location of service and dates
- Current or anticipated deployments

**Professional Society Memberships**

• Report years and type of membership for each professional society to which you currently belong or belonged to in the past.

**Honors and Awards**

• List chronologically the year received, name of each award and/or awarding institution, and nature of award if not apparent.

**Team Coverage Experience**

- List any team coverage experience

**Administrative Service**

- List all committees serviced or chaired and years: including: department committees, SOM committees, hospital committees, special assignments, etc...

**Local and National Service**

- List name of organization and years of service
- Examples: resident leadership roles within the AAOS, AOA and ACGME or other leadership involvement in a professional society, member of an editorial board: editor of symposia, text or journal: examiner of a professional organization: grant reviewer: journal manuscript reviewer: convener of symposia workshop, etc.)

**For example:**

- 2000 Member, Membership Committee, American Board of Orthopaedic Surgery
- 2001 Editorial Board Member, (**Name of Journal**)

**Grant Support**

- List grants chronologically in separate sections whether they are currently active, submitted or completed

**Research Experience**

**Presentations**

**Publications**

- Include last names and initials of all authors and underline or bold own name in each reference
- Provide complete bibliographic information (title, name of source, volume, page numbers, year, etc.)
- Publications should be numbered within each section, **single-spaced** and listed in **chronological** order
- Separate publications according to the following headings:

**Peer-Reviewed Publications**  
**Non-Peer Reviewed Publications**  
**Web based Journal articles**  
**Books & Book Chapters**  
**Abstracts and/or Proceedings**  
**Other Brief Communications**  
**Published Multimedia**

## **EXTRA SUPPORT DOCUMENTS**

Only the following additional documents are accepted:

- Prior Residency Completion Certificate
- Foreign Specialty Program Certificate

## **OTHER EXTRA DOCUMENTS**

If a particular program requests that you provide them with an additional document, mail it directly to the program.

## **EXAMPLE OF DOCUMENTS NOT DISTRIBUTED BY CAS**

These are other examples of documents not distributed by CAS:

- Identification Cards/Documents (Green Card, Marriage Certificate, Driver's Licenses)
- High School Diplomas
- Photos
- Additional letters of reference

## **MISSING DOCUMENTS**

If you are unable to provide a document, state the reason on a separate piece of paper. Without this note, your file is **INCOMPLETE** and will **NOT BE DISTRIBUTED**. This statement of explanation will be included in the distribution of your file to the training programs. There should be a separate explanation note for each missing document. Example: If your USMLE score report is not available when you submit your application, address a note to "Dear Program Director" and explain why the document is not being included and when the program can expect to receive it. Once you receive the document, forward it to CAS to be distributed as a supplemental document to all programs listed on your CAS distribution list.

All materials received by CAS are processed in the order in which they are received. Processing of a supplemental document may take up to three weeks to be processed. We strongly encourage you to submit a **COMPLETE** application to be processed to avoid delays. Some programs may not be able to review your file until all documents are received.

## CAS INITIAL DISTRIBUTION LIST

With your completed application materials, you must submit the online distribution list and payment. **Initial Distribution List** fees increase progressively as follows:

| # of Distributions | Fees             |
|--------------------|------------------|
| 1-10               | \$60 total       |
| 10-20              | \$10 per program |
| 20-30              | \$15 per program |
| 30-40              | \$20 per program |
| 41+                | \$35 per program |

The program directory contains a list of participating programs in the match. There is a two-step process to apply to programs. While viewing the directory, select the check box in the upper left hand corner of each program that is of interest. After choosing the program(s), click the “add to my programs” button, which will advance you to a page with the selected programs. From this list, choose the programs that you would like to apply to by selecting the check box in the “apply” column next to each program and click the “apply to programs” button. A confirmation page will appear and allow you to continue with payment.

**NOTE:** Applications will not be distributed until all required materials have been received.

## ADDING PROGRAMS

You may apply to additional programs after your initial CAS distribution list has been submitted. Supplemental Distribution fee is \$35 per program; **therefore, it is to your advantage to submit your entire list once rather than adding programs later.**

## PAYING YOUR CAS DISTRIBUTION FEES

Fees may be paid by credit card (Visa or MasterCard) or check (personal, cashier’s check or money order). Checks must be mailed separately accompanied by check coupon to:

**SF Match  
c/o Wells Fargo Lockbox Services  
SF Matching Program Dept #34059  
3440 Walnut Ave., Bldg A, 2nd Floor  
Fremont, CA 94538**

Please make checks payable to: *\_[Insert name of Specialty]\_ Match.*

Please note: Credit card payments are applied immediately upon verification. Check payments take approximately five (5) business days to post to your account profile once received from our Wells Fargo lockbox.

## RETURN OF ORIGINAL DOCUMENTS

We provide free storage for original application documents for one year only. **Paper documents will be destroyed after one year.** Digital copies will be stored in pdf format for 3 years. Applicants are strongly encouraged to fill out a “Return of CAS Document Form” after the match has concluded for the return of their original documents. There is a \$20 fee for this service (letters of reference are only returned if access is retained).

### **CONFIRMING RECEIPT OF YOUR CAS APPLICATION PACKAGE**

Please log into your SF Match online profile to view the status of your documents. The status of each document will be marked as “received” in our system once we processed your materials. Please allow five (5) business days since the application materials were received by our office to be reflected as “received” in the system. If your application materials have not been logged into the system after five (5) business days, feel free to contact our office to check the status of your documents.

### **CONFIRMING DISTRIBUTION OF YOUR CAS APPLICATION**

A confirmation e-mail is sent to you when your CAS application has been distributed to the programs on your distribution list. You may also view the status of your application in your SF Match profile online. If **ALL** required documents have the “uploaded” status marked, the documents are available to the programs on your distribution list.

### **CAS CHECKLIST**

Before mailing your CAS package, be sure that you have included all the following **REQUIRED** items:

- CAS Distribution List & Payment (**On-line Submission**)
- Completed CAS Application form (**On-line Submission**)
- Medical School Transcript(s)
- USMLE Scores or equivalent score reports
- Three (3) letters of reference
- ECFMG (applicable to International Graduates)
- CV

### **CONTACT CAS**

Phone: 415.447-0350 ext. “0”

Email: [help@sffmatch.org](mailto:help@sffmatch.org)