## **L'HSC** MEDICINE

## Admissions Acceptance Offer Form

## No enrollment deposit required | **DEADLINE JULY 1**

PLEASE PRINT YOUR NAME

AMCAS ID#  PREFERRED EMAIL ADDRESS	
form (included in your acceptance packet), please complete this form to acknowledge receipt that you have officially accepted our offer. This form should not be completed and returned until AFTER you have returned your acceptance packet form and you have made a final decision to accept our offer.	
Your options to return this form are: (1) e-mail to Diane Harris, or (2) postal mail to the UT Health Science Center College Building, Suite 1043, Memphis, TN 38163; or (3) FAX this for a jpeg will be acceptable.	of Medicine Admissions Office, 910 Madison
Upon receipt (of this form) an e-mail will be sent to you within Students link can be found on the College of Medicine's Admindicated below; then click on the Admitted Students link locat	issions web site. Point your cursor to the link
uthsc.edu/Medicine	P/Admissions
	NEW STUDENT ORIENTATION WEEK  August 10-14, 2020
YOUR SIGNATURE BELOW	WHITE COAT CEREMONY
	August 14, 2020
TODAY'S DATE (MONTH/DAY/YEAR)	PARENTS APPRECIATION DAY
	August 14, 2020 CLASSES BEGIN
	August 17, 2020

**REMINDER:** If you wish to withdraw your offer of acceptance or should you have any questions or concerns, please e-mail Diane Harris, Admissions Coordinator at **diharris@uthsc.edu**.