



Applicant's Name _____
Last First Middle

USMLE®/ECFMG® Identification Number (if assigned) ---

Use this form to submit documents required to complete your USMLE exam application. This form is a transmittal form only and does not substitute for the separate form(s) required for the specific types of submissions outlined below. You must complete and attach any applicable form(s).

The *IWA Document Submission Form* (Form 187) facilitates more efficient processing of your application by ensuring that any additional documents are matched with the on-line part of your application. **Do not send Form 187 if there are no additional documents required to complete your application or if you are submitting a *Certification Statement* (Form 183) or *Certification of Identification Form* (Form 186) only.**

Important Instructions:

Use this form to submit documentation for any one or more of the following reasons:

- Medical Education Credentials, including the final medical diploma (Form 344)
- Medical School Release Request (Form 345)
- Transcript(s) to Document Transferred Credits (Form 344)

- Include your name and USMLE/ECFMG Identification Number in the spaces above.
- Follow the instructions specific to each type of submission outlined on the following pages.
- The completed and signed *IWA Document Submission Form*, any additional form(s), and all required documents must be sent to ECFMG in one envelope.
 - o If this includes a *Certification Statement* (Form 183) or a *Certification of Identification Form* (Form 186) that is signed by an authorized official of your medical school, this envelope must be sent to ECFMG directly from the office of that official. See *Applying for Examination* in the *ECFMG Information Booklet*.
 - o If this includes a *Certification of Identification Form* (Form 186) that is certified **only** by a Consular Official, Notary Public, First Class Magistrate, or Commissioner of Oaths, this envelope can be sent to ECFMG by you. See *Applying for Examination* in the *ECFMG Information Booklet*.

These forms and documents must be sent to:

IWA
ECFMG
3624 Market Street, 4th Floor
Philadelphia, PA 19104-2685 USA

- Direct questions to ECFMG by telephone at (215) 386-5900.

1. MEDICAL EDUCATION CREDENTIALS	YES	NO
<ul style="list-style-type: none"> ● Access the <i>ECFMG Medical Education Credentials Submission Form</i> (Form 344) on the Publications page of the ECFMG website at www.ecfm.org. ● Complete and sign Form 344 as instructed. ● Attach required documents as instructed on Form 344. ● Attach the completed Form 344 and required documents to the <i>IWA Document Submission Form</i> (Form 187). ● Attach your <i>Certification of Identification Form</i> (Form 186), if applicable. ● Place all forms and documents required to complete your application in one envelope. <ul style="list-style-type: none"> ○ If you are required to complete a <i>Certification of Identification Form</i> (Form 186) and that form is signed by an authorized official of your medical school, this envelope must be sent to ECFMG directly from the office of that official. ○ If you are required to complete a <i>Certification of Identification Form</i> (Form 186) and that form is certified only by a Consular Official, Notary Public, First Class Magistrate, or Commissioner of Oaths, this envelope can be sent to ECFMG by you. ○ If you are not required to complete a <i>Certification of Identification Form</i> (Form 186), this envelope can be sent to ECFMG by you. 		
2. MEDICAL SCHOOL RELEASE REQUEST	YES	NO
<ul style="list-style-type: none"> ● Access the <i>Medical School Release Request</i> (Form 345) on the Publications page of the ECFMG website at www.ecfm.org. ● Complete and sign Form 345 as instructed. ● Attach required documents and Form 344, <i>ECFMG Medical Education Credentials Submission Form</i>. ● Attach the <i>IWA Document Submission Form</i> (Form 187), Form 344, and Form 345, along with all required documents. ● Attach your <i>Certification of Identification Form</i> (Form 186), if applicable. ● Place all forms and documents required to complete your application in one envelope. <ul style="list-style-type: none"> ○ If you are required to complete a <i>Certification of Identification Form</i> (Form 186) and that form is signed by an authorized official of your medical school, this envelope must be sent to ECFMG directly from the office of that official. ○ If you are required to complete a <i>Certification of Identification Form</i> (Form 186) and that form is certified only by a Consular Official, Notary Public, First Class Magistrate, or Commissioner of Oaths, this envelope can be sent to ECFMG by you. ○ If you are not required to complete a <i>Certification of Identification Form</i> (Form 186), this envelope can be sent to ECFMG by you. 		
3. TRANSCRIPT(S) TO DOCUMENT TRANSFERRED CREDITS	YES	NO
<ul style="list-style-type: none"> ● Access the <i>ECFMG Medical Education Credentials Submission Form</i> (Form 344) on the Publications page of the ECFMG website at www.ecfm.org. ● Complete and sign Form 344 as instructed. ● Attach required documents as instructed on Form 344. ● Attach the completed Form 344 and required documents to the <i>IWA Document Submission Form</i> (Form 187). ● Attach your <i>Certification of Identification Form</i> (Form 186) or <i>Certification Statement</i> (Form 183), if required. ● Place all forms and documents required to complete your application in one envelope. <ul style="list-style-type: none"> ○ If you are required to complete a <i>Certification Statement</i> (Form 183) or you are required to complete a <i>Certification of Identification Form</i> (Form 186) and that form is signed by an authorized official of your medical school, this envelope must be sent to ECFMG directly from the office of that official. ○ If you are required to complete a <i>Certification of Identification Form</i> (Form 186) and that form is certified only by a Consular Official, Notary Public, First Class Magistrate, or Commissioner of Oaths, this envelope can be sent to ECFMG by you. ○ If you are not required to complete a <i>Certification Statement</i> (Form 183) or a <i>Certification of Identification Form</i> (Form 186), this envelope can be sent to ECFMG by you. 		

Signature (in Latin characters)

Date