



Enrollment Services

MSPE Letter Request Form

(MD Students Only)

KUMC Office of the Registrar
 3901 Rainbow Blvd., MS 4005
 Kansas City, KS 66160
 Phone: 913-588-7055
 Fax: 913-588-8841
 Email: kumcregistrar@kumc.edu

Medical Student Performance Evaluation letters (“Dean’s Letters”) are produced for each graduate of the Medical Doctorate program and will be provided free of charge. Spring graduates’ letters are available to be sent out by early- to mid-March each year.

Please note: If you need your KUMC MSPE to complete the ERAS residency application, please submit your request to the Registrar’s Office through the ERAS system.

Name: _____ KU ID Number: _____

Other Legal Names: _____

Date of Birth: ____ / ____ / _____ Graduating Year: _____

Email: _____ Phone Number: _____

Check order option below:

____ Hold for pick-up (Dykes Library G035)

____ Email to: _____
Email Address

____ Fax to: _____
Fax Number

____ Mail to: _____
Street City State Zip

Please note: It is the student’s responsibility to verify email/ mailing address and confirm receipt of the letter by the intended recipient. Please verify the information above before submitting this request form. An email confirming that the request has been processed will be sent by the KUMC Registrar’s Office to the student’s email address listed above.

Student Signature: _____ Date: _____

Office Use Only

Date Received: _____ Time Received: _____ By: _____ Payment Processed: _____