

Requesting Resubmission of Requirements

This is one of a series of Job Aids to make it easier for you to navigate the VSLO Application Service. To see a complete list of job aids, please visit our training page. If you have questions, please don't hesitate to contact our customer support team for assistance by calling (202) 478-9878 (8:00 am -6:00 pm EST), or by [email](#).

While reviewing applications, you may find a requirement that you need an updated version to be provided for review. The following steps show how to request a requirement be resubmitted.

Please note: The following process can only be completed on the Determine Eligibility, Schedule, Approve, or Confirm tabs. You are not able to request a resubmission from the Student Detail view currently.

To Request a Resubmission from the Determine Eligibility Tab:

1. Find the Applicant you wish to review.
2. Click the arrow to the left of the Applicant's name to view the applications
3. Select the Application, and click "Open" on the Requirement you wish to request a resubmission for

☐	AAMC ID ↑	Student Name ↑	Date Applied ↑	Application Received ↑	Type of Student ↑	Home Institution ↑	Actions
☐	21189119	Holloway, Mary Grace	05/07/2021 11:08 AM	05/07/2021 11:16 AM	DO/MPH Clinical	Alex Home/Host School	SET ELIGIBILITY VIEW VERIFICATION QUESTIONS

Requirement Name	Responsibility	Attachments	Status	Submitted Date	Last Updated Date	Updated By	Actions
MEMED 515C - Cardiology Consult/CCU-BTGH 07/05/2021 - 08/01/2021							
Applications count to be submitted	Student		Complete	05/07/2021 11:08 AM			OPEN

4. Check the box to request a resubmission, enter in a comment, and click "Update". Note: the information provided in the comment section will be included in the email request.

☒ Request that this requirement is resubmitted

Please indicate why this requirement needs to be resubmitted. This information will be included in the email request.

Comments: *

Please provide updated form

[CLOSE](#) [UPDATE](#)

- Once you have completed your review, and have selected any other requirements to be resubmitted, you must click “request Resubmission” to notify the responsible party of your request. You are also able to Discard your request

☐ AAMC ID ↑ Student Name ↑ Date Applied ↑ Application Received ↑ Type of Student ↑ Home Institution ↑ Actions

☐ 21189119 Holloway, Mary Grace 05/07/2021 11:08 AM 05/07/2021 11:16 AM DO/MPH Clinical Alex Home/Host School

[SET ELIGIBILITY](#)
[VIEW VERIFICATION QUESTIONS](#)

MEMED 515C - Cardiology Consult/CCU-BTGH 07/05/2021 - 08/01/2021

[DISCARD CHANGES](#) [REQUEST RESUBMISSION](#)

Requirement Name	Responsibility	Attachments	Status	Submitted Date	Last Updated Date	Updated By	Actions
Applications count to be submitted	Student		▲ Resubmit Requested	05/07/2021 11:08 AM			OPEN

[DISCARD CHANGES](#) [REQUEST RESUBMISSION](#)

- Review the email, make any changes you wish, and click “Send.”

Request Resubmission ✕

i Please indicate why this requirement needs to be resubmitted. This information will be included in the email request.

Reply To Email Address *

email@email.org

Subject *

VSLO: Additional Information Requested

Message Body

AI ▾ ▾ **B** *I* U ~~S~~ **≡** **≡** 

Dear Mary,
 We require the following information for your request:
 Course: MEMED 515C: Cardiology Consult/CCU-BTGH
 Requirement: Applications count to be submitted
 Host Request: Please provide updated form.

[CANCEL](#) [SEND](#)

- Once you send the notification, the application will move out of your workflow. You will be able to view the application on the Applications tab, by selecting “Awaiting Further Action” from the Status filter.
- Once the requirement is resubmitted, the application will be displayed on the Determine Eligibility tab, so the processing can continue.

To Request a Resubmission from the Schedule, Approve, or Confirm Tab:

1. Find the Application you wish to review.
2. Click the arrow to the left of the Applicant's name to view the requirements
3. Click "Open" on the Requirement you wish to request a resubmission for

21198453

MEERM 504 - Emergency Medicine

Requests two experiences

Doe, Amy

Requests two experiences

Hospital

01/17/2022-01/28/2022

01/11/2022 02:28 PM

01/11/2022 02:29 PM

DO Clinical

Eligible

2

Jesse NonMember Home BOTH

Emergency Medicine

SCHEDULE

DENY

Requirement Name	Responsibility	Attachments	Status	Submitted Date	Last Updated Date	Updated By	Actions
Applications count to be submitted	Student		Complete	01/11/2022 02:28 PM			OPEN
CV/Resume	Student	Personal Statement.pdf	Complete	01/11/2022 02:28 PM			OPEN
Photograph	Student	Personal Statement.pdf	Complete	01/11/2022 02:28 PM			OPEN
Transcript	Home Institution	Transcript.pdf	Complete	01/11/2022 02:29 PM			OPEN

4. Check the box to request a resubmission, enter in a comment, and click "Update". Note: the information provided in the comment section will be included in the email request.

☒ Request that this requirement is resubmitted

Please indicate why this requirement needs to be resubmitted. This information will be included in the email request.

Comments: *

Please provide updated form

- Once you have completed your review, and have selected any other requirements to be resubmitted, you must click “request Resubmission” to notify the responsible party of your request. You are also able to Discard your request

Requirement Name	Responsibility	Attachments	Status	Submitted Date	Last Updated Date	Updated By	Actions
Applications count to be submitted	Student		Complete	01/11/2022 02:28 PM			OPEN
CV/Resume	Student	Personal Statement.pdf	Resubmit Requested	01/11/2022 02:28 PM			OPEN
Photograph	Student	Personal Statement.pdf	Complete	01/11/2022 02:28 PM			OPEN
Transcript	Home Institution	Transcript.pdf	Complete	01/11/2022 02:29 PM			OPEN

DISCARD CHANGES REQUEST RESUBMISSION

- Review the email, make any changes you wish, and click “Send.”

Request Resubmission

Please indicate why this requirement needs to be resubmitted. This information will be included in the email request.

Reply To Email Address *

email@email.org

Subject *

VSL0: Additional Information Requested

Message Body

AI

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Dear Mary,

We require the following information for your request:

Course: MEMED 515C: Cardiology Consult/CCU-BTGH

Requirement: Applications count to be submitted

Host Request: Please provide updated form.

CANCEL

SEND

- Once you send the notification, the application will move out of your workflow. You will be able to view the application on the Applications tab, by selecting “Awaiting Further Action” from the Status filter.
- Once the requirement is resubmitted, the application will be displayed on the Schedule, Approve or Confirm tab, so the processing can continue from the same place you requested the resubmission.