**(Insert Name)**

**PhorCAS ID**

**Supplemental Application**

**PGY1 applicants to The Ohio State Wexner Medical Center PGY1 Pharmacy Residency Program must upload responses to both essay question below. Responses should be limited to 250 words per question.**

**Question 1:** Describe a recommendation or intervention you made during an APPE patient care rotation that you are particularly proud of, how was the recommendation taken by the medical team, and, if known, what was the ultimate outcome for the patient?

**Question 2:** Write about something you would like us to know about you that you have not been able to convey elsewhere in your application**.**