

## How to Update Application Requirements

Questions in this section request your program's requirements for an applicant to be considered for interview. The information you provide will be shared with applicants in the ERAS® program during the application process.

1. Navigate to the [ERAS® Program Director's WorkStation \(PDWS\)](#) and enter your AAMC username and password.

### Sign In

Username

⚠ Username is Required

Password

SIGN IN

[FORGOT YOUR USERNAME?](#)

[FORGOT YOUR PASSWORD?](#)

[NEED HELP?](#)

2. Navigate to the Program Management tab and select the appropriate ERAS season.
  - a. Note: Only users with ISU, AISU, PSU, APSU, and Program Management roles in the PDWS have access to view the Program Management tab in the PDWS.
3. Click the program name.

PDWS

Dashboard
Applications
Rankings
Reports
Archives
Program Management
Setup
Program Messages
Thalamus

ERAS-2026 (Current) University of Alabama Hospital | Emergency Medicine

### Program Management - ERAS 2026 (Current Season)

If you have any questions, please [Contact ERAS Client Technical Support](#)

University of Alabama Hospital

UNIVERSITY OF ALABAMA MEDICAL CENTER PROGRAM - Adolescent Medicine (Pediatrics)

Accreditation Id

3210131028

Participation Status

Participating

## 4. Select the Application Requirements tab.

ERAS Participation	ERAS Participation - ERAS 2026 (Current Season)	<a href="#">BACK TO PROGRAM LIST</a>										
<a href="#">Program Characteristics</a> <a href="#">Application Requirements</a>	<b>Program Information</b> <table> <tr> <td><b>Institution</b></td> <td>University of Alabama Hospital</td> </tr> <tr> <td><b>Program</b></td> <td>UNIVERSITY OF ALABAMA MEDICAL CENTER PROGRAM</td> </tr> <tr> <td><b>Specialty</b></td> <td>Adolescent Medicine (Pediatrics)</td> </tr> <tr> <td><b>Accreditation ID</b></td> <td>3210131028</td> </tr> <tr> <td><b>Participation Status</b></td> <td>✔ Participating</td> </tr> </table>	<b>Institution</b>	University of Alabama Hospital	<b>Program</b>	UNIVERSITY OF ALABAMA MEDICAL CENTER PROGRAM	<b>Specialty</b>	Adolescent Medicine (Pediatrics)	<b>Accreditation ID</b>	3210131028	<b>Participation Status</b>	✔ Participating	
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<b>Accreditation ID</b>	3210131028											
<b>Participation Status</b>	✔ Participating											

## 5. Click the Edit button located at the top and bottom of the webpage to update the following information.

- For the upcoming 2026 residency application cycle, applications must include the following to be considered for interview:
  - Total Letters of Recommendation.
  - Standardized or Structured Letter of Evaluation.
  - Letters of Recommendation From your Specialty.
  - Required Away Rotations within Specialty.
  - Supplemental Information.
- Interview Invitations will be Sent on:
  - Universal release date for my specialty.
  - Within the following window.

Program Characteristics	Application Requirements								
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6. Click the Save button located on the top and bottom of the webpage.

SAVE

CANCEL

Questions in this section request your program's requirements for an applicant to be considered for interview. The information you provide will be shared with applicants in ERAS during the application process.

**1. For the upcoming 2026 residency application cycle, applications must include the following to be considered for interview:**

Total Letters of Recommendation

1

Standardized or Structured Letter of Evaluation

Yes

Letters of Recommendation From your Specialty

1

Required Away Rotations within Specialty

Supplemental Information ⓘ

Yes

**2. Interview Invitations will be Sent on:**

☒ Universal release date for my specialty

☐ Within the following window

SAVE

CANCEL