Kevin Thao - Application (AMCAS 2026 and UC San Diego School of Medicine secondary)

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Applying to: UC San Diego School of Medicine MD program, 2026-27

Fictional applicant written for this sample. The person, his employers, his clinics and his student group are invented.

Academics

- University of Minnesota Twin Cities - BS Biochemistry, minor in Public Health, May 2022. GPA 3.58 (science 3.49). First in my family to finish college.
- Lowest grade: C in Organic Chemistry II (spring 2020), the semester classes went online and I was working 25 hours a week at a warehouse. A- in Biochemistry I and II the next year.
- MCAT: April 2025, 503 (CPBS 125, CARS 127, BBFL 126, PSBB 125). June 2026, 511 (CPBS 128, CARS 127, BBFL 128, PSBB 128).
- Languages: English (native), Hmong (fluent spoken; 40-hour medical interpreter training, 2023).

Work and activities (AMCAS, abbreviated)

1. **Clinical research coordinator, Eastside Metabolic Health Study**, Phalen Lake Community Clinic, St. Paul (Aug 2024 - present, about 3,600 hours). *Most meaningful.* A trial comparing community health worker home visits with usual care for adults with type 2 diabetes, most of them Hmong or Karen. I have consented 212 participants, run three-month phone follow-ups and translated the consent form and surveys into Hmong. In spring 2025 enrollment was at 40% of target; I led a team of two other coordinators and a CHW to move recruitment from flyers to clinic waiting rooms and Saturday church events. We reached target in March 2026, but one coordinator felt I had taken over her sites without asking, and she was right. We now split sites at a weekly meeting I run. About a third of participants were given remote glucose monitors; 19 of them dropped out, mostly because the app needed a smartphone or Wi-Fi they didn't have, or because insurance prior authorization for continuous glucose monitors took months.
2. **Research technician, Forsberg Lab, Department of Pharmacology**, University of Minnesota (Jun 2022 - Jul 2024, about 3,800 hours). *Most meaningful.* Studied how a high-fructose diet changes fat handling in mouse livers. Ran tissue staining, lipid assays and the mouse colony. Fourth author on a 2024 paper showing liver fat rose before mice gained much weight. That mattered to me because fatty liver and diabetes show up in many Asian American patients at a lower BMI than screening rules assume.
3. **Volunteer Hmong medical interpreter**, Frogtown Free Clinic, St. Paul (Jan 2023 - present, 180 hours). *Most meaningful.* Tuesday evening clinic for uninsured adults, many of them older

Hmong patients or recent arrivals without papers. I have also had to interpret a visit where the patient's choice to see a shaman first was treated as the problem.

4. **Hospice volunteer**, Riverview Hospice, Roseville, Minnesota (Sep 2021 - May 2022, 90 hours). Weekly companion visits; sat with three patients in their last days.
5. **Physician shadowing** (2022 - 2025, 64 hours). Family medicine (40), endocrinology (16), emergency medicine (8).
6. **Treasurer, then president, Hmong Pre-Health Circle**, University of Minnesota (Sep 2020 - May 2022, 300 hours). Peer mentoring and MCAT book lending for about 45 members.
7. **Warehouse associate, overnight shift**, Midway Grocery Distribution, St. Paul (Jun 2019 - May 2021, 25 hours/week).
8. **Family farm stand**, Thao Family Farm, St. Paul Farmers Market (2012 - 2022, summer Saturdays). Bitter melon, long beans, and making change at 6 a.m.
9. **Hobbies**: Hmong tournament volleyball every July 4th weekend, ice fishing with my uncles, and cooking for my nieces.

AMCAS personal comments essay

The first word I had to translate that I didn't know in Hmong was neuropathy. I was seventeen, sitting in a podiatry clinic with my grandmother, and the doctor wanted to know whether she could feel the monofilament on her foot. She couldn't. Eight months later she lost two toes on that foot, and a year after that, the foot.

For a long time I thought the problem had been my vocabulary. Later I understood it was bigger. My grandmother took her metformin when her stomach allowed it, trusted the herbal tea my aunt boiled more than the pills, and never told the doctor because nobody asked in a way she could answer. She wasn't noncompliant. She was making decisions with information that hadn't reached her.

I didn't go straight toward medicine. I got a C in organic chemistry while stocking shelves overnight, and I took a lab job after graduation partly because I wasn't sure I was good enough. Two years of mouse livers taught me patience and how to troubleshoot a failed assay at 9 p.m., and they gave me a clear picture of something I had watched in my family: liver fat building quietly, long before anyone looks sick.

The moment it settled for me was on a Tuesday at the Frogtown Free Clinic in 2023. An older man told the resident, through me, that he had delayed his visit to hold a hu plig ceremony. The resident sighed and moved on to the A1c. The man stopped talking. I didn't fix it that night. But the next week, with a different physician, a similar patient explained his ceremony, and she asked whether the shaman had said anything about his eating. They worked out a plan around both. I wanted to be the second doctor.

In my current job I sit with patients like my grandmother every week. I have learned that consent takes three visits sometimes, that a glucose monitor is useless without Wi-Fi, and that an insurance denial can undo a good plan faster than any disease. I don't have as many clinical hours as some applicants, because I spent my years after college in a lab and a research office, and I needed paid work. What I do have is a habit of asking patients what they actually do at home, and the language to hear the answer. I want to become a family physician who treats diabetes in immigrant communities, and who knows that the tea and the ceremony are part of the history.

UC San Diego secondary (2026-27)

Describe how your background and experiences would contribute to the UC San Diego School of Medicine community.

I grew up in a Hmong family in St. Paul where three generations shared one house and one car. I can explain a consent form to an elder who has never read Hmong, and I know when a nodding patient means 'I understand' and when it means 'I respect you too much to disagree.' I would bring that to the student-run free clinics, and I'd like to help the next Hmong student who thinks a C in organic chemistry ends the story.

Describe a challenge you have faced and what you learned.

My first MCAT, a 503, came after I studied around 50-hour weeks at the clinic and told no one I was struggling. For the retake I asked my supervisor for a four-day schedule for ten weeks, joined a study group and took six full-length tests. I learned that asking for help early is a skill, not a weakness, and I still practice it.

Why UC San Diego? You are not a California resident; why California?

My older sister is a nurse in Chula Vista, and I have cousins in Fresno, where the largest Hmong community outside St. Paul has the same diabetes and access problems I see at work. The PRIME-HEq program and the free clinic network would let me keep doing community work while I learn. I also want to train in a state where a large share of patients speak a language other than English and are often uninsured or undocumented. I hope to practice in the Central Valley or come back to St. Paul.

Please describe your activities from now until matriculation.

I will keep working full time at Phalen Lake Community Clinic until June 2027, finishing 12-month follow-ups for the diabetes study, interpret on Tuesdays at Frogtown, and coach my niece's volleyball team.

How do you plan to finance your medical education?

I have saved $14,000. I will use federal loans and apply for need-based aid and service-commitment scholarships such as the National Health Service Corps; my family cannot contribute.