DEPARTMENT OF EPIDEMIOLOGY AND PUBLIC HEALTH
UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE
APPLICATION FOR RESIDENCY TRAINING IN PREVENTIVE MEDICINE

NAME:		START DATE: FULL TIME ☐ PART TIME ☐ PGY2 ☐ PGY3 ☐
ADDRESS:		U.S. CITIZEN: Yes No VISA STATUS (if applicable):
SOCIAL SECURITY NUMBER:	BIRTHDATE:	BIRTHPLACE:
TELEPHONE NUMBERS HOME:		WORK:
FAX:	E-MAIL:	

PREMEDICAL EDUCATION	School:	Location:	Degree:	Date:
MEDICAL EDUCATION	School:	Location:	Degree:	Date:
RESIDENCY TRAINING	School:	Location:	Degree:	Date:
POSTDOCTORAL FELLOWSHIP	School:	Location:	Degree:	Date:

MEDICAL BOARD EXAMINATIONS	WHERE TAKEN	DATE	SCORES
USMLE			
FLEX			
ECFMG			
OTHER			

MEDICAL LICENSURE		
State	License Number	Expiration Date

PGY-1 RESIDENT TRAINING
PROGRAM DIRECTOR
(Address and Phone Number Required)

Name: _____

Address: _____

_____

Phone: _____

REFERENCES: At least three required, including one from your medical school dean's office and one from your PGY1 Program Director. Please request that letters be sent directly to this Department.		
NAME AND TITLE	ADDRESS	TELEPHONE NUMBER
1.		
2.		
3.		

How did you learn about our program? [Check appropriate box(es).]			
☐ Directory, Graduate Medical Education Programs	☐ Directory, Preventive Medicine Residency Programs	☐ Brochure	☐ **Website** ☐ UMD ☐ ACPM ☐ Other
☐ Current/ Former Resident	☐ Colleague	☐ Advertisement	☐ Other (Specify)

TRANSCRIPTS: Both undergraduate and medical school transcripts are required. Please have TWO official copies of your transcripts sent directly to this Department at the address given below.	
BIOGRAPHICAL SKETCH: Please specify your reasons for selecting residency training in Preventive Medicine and include information about your special skills, interest and career goals. Also provide your C.V.	
PHOTOGRAPHS: Requested for identification purposes only. Please sign on the back and enclose with application. (Include two photos.)	
DATE OF APPLICATION:	SIGNATURE OF APPLICANT:

Please send this form to:

Sania Amr, M.D., M.S.
Director, Preventive Medicine Residency Program
University of Maryland Baltimore
660 West Redwood Street
Rm. 133C, Howard Hall
Baltimore, Maryland 21201-1596