

A. EDUCATION

Non-Medical Education-list chronologically (include only higher education)

School 1	Institution		EducationType		
	City	State	DegreeAwarded	Undergraduate	Graduate

B. TRAINING

Current / Prior Medical Training

List each internship, residency, or fellowship training position you have had or currently hold, regardless of the amount of time spent at each.

Training 1	Institution		Education Type		Program Director
			Internship	Residency	Fellowship
	Program		City		State
Dates of Attendance (mo/yr to mo/yr)		Status			
		Completed	In progress	Other (please explain)	

Training 2	Institution		Education Type		Program Director
			Internship	Residency	Fellowship
	Program		City		State
Dates of Attendance (mo/yr to mo/yr)		Status			
		Completed	In progress	Other (please explain)	

Training 3	Institution		Education Type		Program Director
			Internship	Residency	Fellowship
	Program		City		State
Dates of Attendance (mo/yr to mo/yr)		Status			
		Completed	In progress	Other (please explain)	

Training 4	Institution		Education Type		Program Director
			Internship	Residency	Fellowship
	Program		City		State
Dates of Attendance (mo/yr to mo/yr)		Status			
		Completed	In progress	Other (please explain)	

Have you ever been discharged/terminated/failed to have a contract renewed by a training program? Yes No

Have you ever resigned from or been placed on probation by a training program? Yes No

Was your medical training ever interrupted or extended? Yes No

Please explain any "Yes" answers to the above, including any gaps in training:

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C. EMPLOYMENT/RESEARCH

Work Experience

Please include relevant work, research, volunteer, teaching, or committee work.

Job 1	Organization	Title/Position	Dates (mo/yr to mo/yr)	
	Brief Job Description	City	State	
Job 2	Organization	Title/Position	Dates (mo/yr to mo/yr)	
	Brief Job Description	City	State	
Job 3	Organization	Title/Position	Dates (mo/yr to mo/yr)	
	Brief Job Description	City	State	
Job 4	Organization	Title/Position	Dates (mo/yr to mo/yr)	
	Brief Job Description	City	State	

Research:

Please detail research experience, publications, or grants.

Name_____

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E. DECLARATIONS AND ATTESTATIONS

Has your medical license ever been suspended/revoked/voluntarily terminated?

Yes No
Yes No

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F. REFERENCES

Three letters of reference are required. One letter from your training program director is required. The other two letters should be from objective physicians (i.e., not relatives or family friends) who have direct personal knowledge of your skills and ethics. Please indicate below the letters of reference that are part of your application.

Letter of Reference #1 (Training Program Director)	
Name and Title:	
Institution:	
Email address:	Phone:
<input type="checkbox"/> I have waived access to this letter and have informed the author of this conflict. <input type="checkbox"/> I desire access to the above letter and have informed the author.	
Letter of Reference #2	
Name and Title:	
Institution:	
Email address:	Phone:
<input type="checkbox"/> I have waived access to this letter and have informed the author of this conflict. <input type="checkbox"/> I desire access to the above letter and have informed the author.	
Letter of Reference #3	
Name and Title:	
Institution:	
Email address:	Phone:
<input type="checkbox"/> I have waived access to this letter and have informed the author of this conflict. <input type="checkbox"/> I desire access to the above letter and have informed the author.	

Name_____

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G. ADDITIONAL INFORMATION

Personal Statement

What particular personal qualifications and characteristics will allow you to become an effective consultant in the field of anesthesiology?
D Q G D F X W H S D L Q P H G L F L Q H

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Extended Questions

Please choose two of the following questions and answer each one in the space provided (suggested length no longer than 200 words per question).

A How will completion of a U H J Lane Residency Program affect your goals?
B Describe what you consider to be your most significant contribution or achievement, including the impact you made.

C Being a part of hospital leadership should be important to anesthesiologists. What role do you think you might take within the leadership structure of your future hospital?

D Describe a challenging situation in your life or career and what you learned from it.

Question #1 Question chosen (circle one): a. b. c.

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Question #2 Question chosen (circle one): a. b. c.

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