

Healthcare Administration Scholars Program

Application Form

House Officers interested in the program should submit:

- Application
 - Form (below)
 - Personal statement
 - Include statement and description of:
 - 1. long term career goals
 - 2. personal goals for participation in the Healthcare Administration Scholars Program
 - 3. a description of a healthcare administration project, or issue that you would like to work on or address during the scholars program.
 - The personal statement should be no longer than one (1) page, single spaced. Please use 12 point, Times New Roman font.
- Letter of recommendation from your Program Director
- Curriculum Vitae

Name:

Name of GME Training Progr	ram:			
Check one:	Residency Fellowship			
Total number of years of current training program:				
As of September 1, 2023, wh program?	at year will you be in your training			
E-Mail Address:				
Home Address:				
City, State, Zip Code:				
Applicant's Signature:	Date:			
release time to the Scholar so the services to arrange release time a	ne: rector acknowledges the expectation that they will provide appropriate y can participate fully in the program. This includes working with off- and constructing the Scholars' schedule to create optimum opportunity program will provide tuition support for the participant.			

Program Director's Signature:	Date:	
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Submit applications to:

Cindy Trafford Department of Emergency Medicine 1500 E. Medical Center Drive, SPC 5303 B1-354 Taubman Center Ann Arbor, MI 48109-5303

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