

(Please Print or Type)

APPLICATION FOR FELLOWSHIP POSITION IN BURN SURGERY

NAME (Last, First, Middle)				SOCIAL SECURITY NUMBER (Optional)	
RESIDENCY SPECIALTY		APPOINTMENT LEVEL (4th year, etc.)			EFFECTIVE DATE
PRESENT MAILING ADDRESS (Number, Street, City, State, ZIP)				HOME TELEPHONE	
PERMANENT MAILING ADDRESS				CELLULAR TELEPHONE	
SEX	BIRTHDATE (optional)	BIRTH PLACE	CITIZENSHIP		
ETHNIC IDENTITY (optional) What is your racial /ethnic self description? <input type="checkbox"/> 1. Black <input type="checkbox"/> 5. Hispanic <input type="checkbox"/> 2. American Indian or Alaskan Native <input type="checkbox"/> a. Mexican American or Chicano <input type="checkbox"/> 3. White <input type="checkbox"/> b. Puerto Rican (Mainland) <input type="checkbox"/> 4. Asian or Pacific Islander <input type="checkbox"/> c. Puerto Rican (Commonwealth) <input type="checkbox"/> d. Other Hispanic					
TYPE	SCHOOL/HOSPITAL	ADDRESS	DATES ATTENDED		DEGREE/TYPE/ SPECIALTY
			FROM	TO	
Pre Med					
Medical					
Graduate					
Internship					
Residency					
Clinical Fellowship					
OTHER PROFESSIONAL AND SCIENTIFIC EXPERIENCE WITH DATES (research fellowships, practice, etc)					
PROFESSIONAL ACHIEVEMENTS (honors and awards, professional and scientific societies, publications)					
PERSONAL INTERESTS/HOBBIES					
STATE	NUMBER	DATE ISSUED	STATE	NUMBER	DATE ISSUED
LICENSURE					

PROFESSIONAL REFERENCES – Please ask three individuals to send letters of reference.		
NAME	TITLE	ADDRESS
Are you also interested in the Surgical Critical Care Fellowship?		
Brief Personal Statement about Career Goals (Can be a separate attachment)		
SIGNATURE		DATE

THE UNIVERSITY OF CALIFORNIA IS AN EQUAL OPPORTUNITY EMPLOYER

INSTRUCTIONS:

1. Email application to ucdburnfellowship@ucdmucdavis.edu.

David Greenhalgh, M.D., FACS
Chief of Burns, UC Davis and Shriners Hospital for Children
2425 Stockton Blvd., Suite 718
Sacramento, CA 95817

Phone: (916) 453-2050 Fax: (916) 453-2373

2. Attach a curriculum vitae.

3. Make sure that letters of reference are sent directly to
ucdburnfellowship@ucdmucdavis.edu

4. Along with your application, please send a digital photo.