

UW Medicine

SCHOOL OF MEDICINE

Department of OB/GYN Visiting Student Diversity Program

Applicant Information
Name:
Address:
City/St/Zip:
Email:
Phone number:
Race/Ethnicity:

Medical Education
Medical School:
Expected Graduation date:

Additional Information:
Birth date:
Birth place:
Have you ever been subject to review, challenges, and/or disciplinary action, formal or informal, by an ethics committee, licensing board, medical disciplinary board, professional association or education/training institution?
Yes <i>If yes please explain in separate page</i>
No

Required documents checklist:
1. Application
2. USMLE Step 1 score report; if already taken, Step 2 score report
3. Copy of medical school transcript
4. CV
5. Personal Statement
6. Letter of Recommendation from Clinical Faculty

Personal Statement: In a single page, please explain:

- * What features do you feel allow you to bring Diversity to our institution
- * Your interest Obstetrics and Gynecology
- * Your interest in UW OB/GYN program specifically
- * Subspecialty interests, if present
- * Your interest in the University of Washington or Seattle.

Preference will be given to applications received by May 1.

Selected applicants will be contacted by June 1.

Please send all application materials to obclerk@uw.edu