SUNY DOWNSTATE Medical Center

APPLICATION FOR THE SCHOOL OF PUBLIC HEALTH'S ELECTIVE PUBH 4540: GLOBAL HEALTH IN DEVELOPING COUNTRIES

Please submit completed applications to Ms. Catherine Seelig in the School of Public Health (PHAB 5-034) or e-mail to catherine.seelig@downstate.edu . If you have any questions, please contact us at (718) 804-7827 or (718) 270-1056.

NAME _____ SEX: ☐ M ☐ F
(Last) (First) (MI)

Degrees Obtained to Date _____

HOME ADDRESS _____

HOME TELEPHONE # _____ CELL PHONE # _____

YEAR OF GRADUATION FROM MEDICAL SCHOOL _____

COUNTRY PREFERENCE(S) FOR ELECTIVE _____
(Current existing sites – Costa Rica (Spanish-speaking), India, Taiwan, Thailand)

PROPOSED ALTERNATIVE SITE (if securing alternate approved site):

Name of Overseas Preceptor _____

Address of Overseas Preceptor_____
_____

PLEASE NOTE THAT THE NUMBER OF AVAILABLE SLOTS AT OVERSEAS SITES IS LIMITED. IN ORDER TO ASSIST THE COMMITTEE IN THE SELECTION PROCESS, PLEASE PROVIDE A PERSONAL STATEMENT OF 500 WORDS OR MORE AS DESCRIBED BELOW.

PERSONAL STATEMENT: OUTLINE YOUR REASONS FOR: (1) WISHING TO PARTICIPATE IN THIS ELECTIVE; (2) WHAT YOU THINK YOU WOULD BRING TO THIS ELECTIVE; AND (3) WHAT YOU WOULD HOPE TO GAIN FROM THIS ELECTIVE.

PLEASE SUBMIT YOUR PERSONAL STATEMENT ON A SEPERATE PAGE IN MS-WORD FORMAT.

PRINT NAME **SIGNATURE** **DATE**