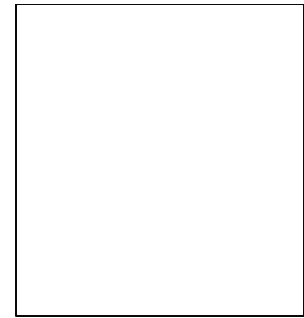


**Mount Sinai School of Medicine  
Leni and Peter W. May Department of Orthopaedics  
Foot and Ankle Fellowship Application**

September 1, 2005 – February 28, 2006

**\*\*Application Deadline – February 1, 2005\*\***



*INSERT PHOTO*

**Fellowship Director:** Steven B. Weinfeld, M.D.

**GENERAL INFORMATION**

**Name:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City & State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Home Tel:** \_\_\_\_\_ **Work Tel:** \_\_\_\_\_

**Pager:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Are you a U.S. Citizen?** Y\_\_\_\_ N\_\_\_\_

**In not a U.S. citizen, please include type of Visa** \_\_\_\_\_

**Alien Registration #** \_\_\_\_\_

**Do you have the legal right to work in the US?** Y\_\_\_\_ N\_\_\_\_

**Foreign Languages Spoken** \_\_\_\_\_

**Any Military Commitment Pending** \_\_\_\_\_

**EDUCATION**

	Institution, City	Dates of Attendance	Degree/Diploma	Date of Graduation
College				
Graduate School				
Medical School				

**POST GRADUATE EDUCATION**

Institution	Position	Inclusive Dates

**List any honors, special awards, and/or recent publications:**

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**CREDENTIALS**

**USMLE**    Part 1:    Date/Score    \_\_\_\_\_    **FLEX EXAM**    Y \_\_\_\_\_    N \_\_\_\_\_  
Part 2:    Date/Score    \_\_\_\_\_  
Part 3:    Date/Score    \_\_\_\_\_

**MEDICAL LICENSES** (list states)

<u>State</u>	<u>License #</u>	<u>Expiration Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you have any physical, emotional, or medical disabilities that would affect your fellowship performance or ability? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any special interests or hobbies \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

Please request at least (3) physicians or teachers, under whom you have worked with in a clinical setting, to send letters of recommendation. (1) of your letters of recommendations must be from your Residency Program Director.

List the names, addresses and office numbers of those who will be writing letters for you.

1.

2.

3.

**A completed application, (3) references, personal statement, copy of medical license, and a c.v. is due on February 1, 2005.**