

Clinical interests: _____

Research and teaching experience (please describe in detail any research, and submit synopsis, if possible):

Publications (please submit copies, if possible): _____

Honors: _____

Hobbies, sports interests, and community activities: _____

When are you interested in starting your Fellowship? _____

1. Write a 1-2 page essay describing: a) your interest in adolescent medicine, b) how you think your fellowship will further your career goal, and c) why you like teenagers enough to spend an extra 1-3 years learning about them.
2. Three letters of recommendation are required from faculty physicians. One needs to be written by the director of your residency program or the chairman of your department. They should be sent directly to the address below.
3. A personal interview is required. An appointment will be scheduled at the applicant's request.

Signature

Date

Return application to: Eric J. Sigel, MD
Associate Professor of Pediatrics
Adolescent Medicine Clinic
The Children's Hospital
13123 East 16th Avenue, B025
Aurora, Colorado 80045
720-777-6133