**Mount Sinai Downtown RESIDENCY IN URBAN FAMILY medicine**

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# Academic Integrative Family Medicine Fellowship

APPLICATIONS OPEN FOR SUBMISSION SEPTEMBER 6, 2016

Please copy, complete and submit the application electronically to Dr. Raymond Teets, [rteets@insitute.org](mailto:rteets@insitute.org), along with your CV. In addition, please write 1-2 paragraphs to answer each of the following questions:

1. Where would you like to see yourself professionally in 5-10 years?

1. Why are you interested in integrative medicine?

# Application

Name:

Email address: Telephone:

Mailing address:

Degrees (list all):

Date Received: Institution:

Other relevant professional work:

Current licensure and boards:

Professional membership(s):

Presentations (i.e. grand rounds or professional or community organizations):

Involvement and/or experience in CAM and/or Integrative Medicine:

Languages:

Professional references (department chair, program director):

(Send letters as directed above)

Name: Phone:

Email: Position:

Name: Phone:

Email: Position:

Name: Phone:

Email: Position: