

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zipcode)

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

- Race/ Ethnicity:**
- Black or African American
  - Hispanic or Latino
  - American Indian or Alaska Native
  - Native Hawaiian or Other Pacific Islander
  - Other \_\_\_\_\_

**Undergraduate Education**

Undergraduate College(s)	Date(s) attended	Degree

**Medical Education**

Medical school(s) and Locations	Dates Attended	Degree

USMLE: Step 1 Score: \_\_\_\_\_ Step 2 Score (if available): \_\_\_\_\_

**Rotation dates:**

Please indicated your desired rotation date by ranking top three preferences (1-3)

- Block 1 Aug 2– Aug 27, 2021 \_\_\_\_\_
- Block 2 Aug 30 - Sept 24, 2021 \_\_\_\_\_
- Block 3 Sept 27– Oct 22, 2021 \_\_\_\_\_

**Supplemental material checklist:**

- Completed VSAS application to CMRSU clerkship
- Personal statement describing your career goals and interest in pursuing the Emergency Medicine clerkship at Cooper (limit to 500 words)
- One letter of recommendation from a faculty member

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please send all completed application materials to:*

Attn: Dr. Sundip Patel · Department of Emergency Medicine · Cooper University Hospital · One Cooper Plaza, Keleman 152 · Camden, NJ 08103  
Patel-sundip@Cooperhealth.edu



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