

**APPLICATION FORM**

**Section I: General information**

Your Full Name:

(Surname, First Name, Middle, Other)

Name you go by:

Nationality:

Spouse's Date of Birth:

Your Current Mailing Address:

One or Several Phone numbers when we can reach you:

Cell Phone Number (include County Code)

Your current e-mail address:

Date of Birth:

Gender/Sex  Male  Female

Spouse's Name

Date of Marriage:

**Section II: ACADEMIC HISTORY: Please list, in order, the schools you have attended:**

<u>Dates</u>	<u>School Name and Address</u>	<u>Certificate Received</u>
1. From      to		
2. From      to		
3. From      to		
4. From      to		
5. From      to		

**Describe any Medical training you received after graduating from Medical School:**

<u>Dates</u>	<u>Hospital Name and Address</u>	<u>Certification</u>
1. From      to		
2. From      to		
3. From      to		
4. From      to		

**List the places you have worked since graduation**

<u>Dates</u>	<u>Name and Address</u>	<u>Position Held</u>
1. From      to		
2. From      to		
3. From      to		
4. From      to		

**On a separate page, please answer the following questions in detail. At least a full paragraph is required for each answer.**

1. Why did you choose to go into medicine as a career?
2. Why do you want to become a Surgeon?
3. What attributes and abilities do you have that you believe will help you in pursuing surgery as a career?

4. How are you prepared to handle the rigors of five years of surgery residency training?
5. What do you want to do after you finish General Surgery training?

**Additional Requirements**

**Your application must include the following to be complete:**

1. A copy of your birth certificate.
2. A copy of your government issued photo ID
3. A copy of your current passport
4. A copy of your marriage license (if married)
5. A copy of your Medical School Transcript (either individually by year or cumulative)
6. A copy of your Medical diploma
7. A copy of your Kenyan Medical License (and evidence that is current)
8. A passport size photograph.