

Educational Information

Medical School: _____

City, State, Country: _____

Graduation Date: (MM/YY) _____ Class Standing (if known): _____

Honors: _____

Internship: _____ Dates: _____

City, State, Country: _____

Residency: _____ Dates: _____

City, State, Country: _____

Residency: _____ Dates: _____

City, State, Country: _____

Fellowship: _____ Dates: _____

City, State, Country: _____

Research Information

Past Research Experience:

Number of publications in referenced journals: _____

Number of published abstracts: _____

If you come to LSU, what areas of research do you plan to pursue?

Licensure Information

Have you passed?

- 1) National Boards (USMLE) _____ If yes, date: _____
- 2) Date passed Step 1: _____ Step 2: _____ Step 3: _____
- 2) FLEX _____ If yes, date: _____
- 3) VQE _____ If yes, date _____
- 4) ECFMG permanent certificate # : _____ expires: _____

Are you NOW eligible for the American Board of Ophthalmology? _____
If Diplomate, give date: _____

Present Licensure (please include state and number):

Letters of Recommendation

You should include both the Director of your residency and your corea preceptor. At least one additional reference is requested.

Name: _____ Title: _____
Address: _____

Phone: _____ Email: _____

Name: _____ Title: _____
Address: _____

Phone: _____ Email: _____

Name: _____ Title: _____
Address: _____

Phone: _____ Email: _____

Please attach to this application: a current copy of your CV, a personal statement including your long-term career pans in Ophthalmology, a recent photograph, and letters of recommendation.

Return all documents to:

Cornea Fellowship Coordinator
LSU Eye Center
2020 Gravier Street, Suite. B
New Orleans, LA 70112

While the clinical cornea fellowship position is fully funded, all applicants are encouraged to apply for a Heed Foundation Fellowship, or other support grants.

If you have submitted, or are planning to submit, an application for support, list the name of source(s) and the requested amount:

SUPPORT GRANTS MUST BE AWARDED PRIOR TO BEGINNING DATE OF FELLOWSHIP.