

Name \_\_\_\_\_ Date \_\_\_\_\_

Medical School or Residency \_\_\_\_\_

Type of Applicant     Medical Student                                 FM Resident                                 Faculty

Program Year \_\_\_\_\_ Anticipated Completion Date \_\_\_\_\_

Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

Please write a brief (100 – 200 words) bio and interest statement below. Let us know who are, why advocacy is of interest to you and what issues are most important to you.

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What issues are of most interest to you?

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Application Deadline: August 31, 2024                                Submit by email to: [Louisem@oafp.org](mailto:Louisem@oafp.org)

## **Residency Director Approval**

In order for you to participate in this program, approval must be gained from the Residency Director of the program in which you are presently registered.

Applicant's Name \_\_\_\_\_

Residency Program Director \_\_\_\_\_

I give my consent for the applicant to participate in the 24-25 Policy Scholars Program.

If you feel that additional information is pertinent to this application, please use the space below to elaborate:

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