

Personal Statement

Why are you applying to this program?

In what specific ways do you think you can contribute to this program?

What are your career plans at present?

Do you have an interest in research:

Publications:

What interest do you have outside of medicine?

Instructions

Along with this application, please send your **Medical School Transcript, USMLE Scores** and at least **three current letters of recommendation**. One of these letters must be from your present Department Chair. If you have any additional questions concerning our program, please do not hesitate to contact us.

Please send your application packet to:

Dawn Osborn
Pain Program Coordinator
Department of Anesthesiology
C213 Med Inn Building
1500 E. Medical Center Drive
Ann Arbor, MI 48109