



**Harvard-wide Pediatric  
Health Services Research Fellowship Program  
APPLICATION FORM**

**Deadline: September 10th, 2019 (for July 2020 entry)**

<b>Name</b>	<b>Professional Degree(s)</b>
<b>Current Position &amp; Institution</b>	<b>Phone Number</b>
<b>Board Status or Exam Date</b>	
<b>Mailing Address</b>	
<b>Email Address</b>	

**REQUIRED DOCUMENTS:**

- 1. Curriculum Vitae**
- 2. Personal Statement --- in less than 2 pages, please explain your career goals, how the fellowship program would further these goals, and the type of research questions you would like to address.**
- 3. Three (3) Letters of Recommendation --- letters should be addressed to Program Director, Jonathan Finkelstein, MD, MPH, and must be e-mailed directly from the letter writer to Associate Director, Erinn Rhodes, MD, MPH: [erinn.rhodes@childrens.harvard.edu](mailto:erinn.rhodes@childrens.harvard.edu)**

*For each of your letter writers, please list their name, current position, and institution:*

**Letter #1**

**Letter #2**

**Letter #3**

**Our federal reporting requirements include information about our prospective trainees with respect to their race, ethnicity and self-report of disabilities. Your responses are voluntary and will not impact the evaluation of your application.**

**Race (check all that apply)**

American Indian/Alaska Native  
 Native  
 Asian  
 Native Hawaiian or Other Pacific Islander  
 Black or African American  
 White  
 Prefer not to respond

**Ethnicity (please check one)**

Hispanic/Latino  
 Not Hispanic/Latino  
 Prefer not to respond

**Do you have (or have you had) a disability defined as a physical or mental impairment that substantially limits one or more of your major life activities?**

I have a disability  
 I do not have a disability  
 I do not wish to identify my disability status

**How did you hear about the Harvard-wide Pediatric Health Services Research Fellowship Program? (check all that apply)**

Friend/Colleague	Advertisement
Mentor/Advisor	Web Search
LISTSERV	Other

**Please e-mail your completed application form, CV, and personal statement to:**

Erinn Rhodes, MD, MPH, Associate Director

[erinn.rhodes@childrens.harvard.edu](mailto:erinn.rhodes@childrens.harvard.edu)