

**RABKIN FELLOWSHIP IN MEDICAL EDUCATION
REQUEST FOR APPLICATIONS
FELLOWSHIP PERIOD: JULY 1, 2019 – JUNE 30, 2020**

www.bidmc.org/rabkinfellowship

INSTRUCTIONS

The following application documents should be sent in a **single email** to the contact below:

1. The application coversheet
2. A personal statement describing your interest in medical education and outlining what you hope to gain from the Fellowship
3. A one to two-page description of a project you wish to pursue during the Fellowship year, including the following elements:
 - Background
 - A clear statement of purpose
 - Description of intervention and/or research methodology
 - Potential evaluation strategies
4. An HMS-formatted Curriculum Vitae

Additionally, a letter of recommendation and support from your Department Chair or Division Chief should be emailed directly to the contact below. This document must include an unambiguous statement of commitment to provide 20% FTE protected time away from clinical and other administrative duties during the Fellowship year, especially at the time of the sessions.

For clinical fellow applicants: A letter of recommendation and support should come from your Program Director, which should include a statement of commitment to provide dedicated time (20% FTE) for you during the Fellowship year.

Completed applications are due by Friday, February 15, 2019 at 5PM, including the letter of support and recommendation. Rabkin Fellowship awards will be announced in mid-March 2019.

CONTACT: Mrs. Kelly Anastasio, Shapiro Institute for Education and Research at HMS and BIDMC, email: kanasta2@bidmc.harvard.edu; phone: 617-667-0900; fax: 617-667-9122

**RABKIN FELLOWSHIP IN MEDICAL EDUCATION AY2019-2020
APPLICATION COVER SHEET**

Last name:	First name:
Post-graduate degree(s):	HMS academic title:
HMS-affiliated institution:	Department/Division:
Fellowship Program (<i>if applicable</i>):	
Cell phone #:	Email address:
Name of Department Chair or Division Chief who will attest to your 20% protected time:	Name of Fellowship Program Director (<i>if applicable</i>):
Chair/Chief/Program Director email address:	Names and email address of 2 HMS faculty to serve as references (e.g., peers, Rabkin alumni):
Title of proposed project:	

Please answer the following questions.

Have you applied for the Rabkin Fellowship before? If so, what year(s)?
Are you applying to another medical education fellowship or similar program this year? If so, which one(s)?