



Dear Renal Transplant Fellowship Candidate,

Thank you for your interest in our accredited one-year Renal Transplant Fellowship Training Program in Tampa, Florida.

In order to complete your application, we request that you submit the following documents:

- Completed application
- A CV and Personal Statement
- Three Letters of Recommendation
- USMLE Scores (or equivalent)
- Any Additional Documents which will strengthen your application

Application and supporting documents can be mailed to:

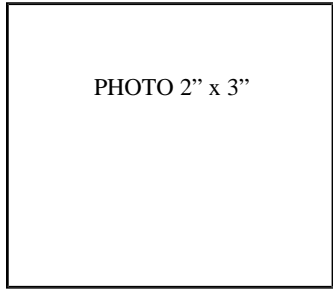
**Hailey Palmer, M.Ed**  
**Academic Services Administrator**  
**Division of Nephrology & Hypertension**  
**Department of Internal Medicine**  
**University of South Florida**  
**2 Tampa General Circle, 6<sup>th</sup> Floor | Tampa, FL | 33606**  
**Office 813.259.2177 | Fax 813.250.2790**  
**E-mail: [hpalmer@health.usf.edu](mailto:hpalmer@health.usf.edu)**

We appreciate your interest in our fellowship program and look forward to receiving your completed application.

Sincerely,

**Luis Beltran, MD**  
**University of South Florida**  
**Assistant Professor of Medicine, Morsani College of Medicine**  
**Transplant Nephrology Fellowship Program Director**

**RENAL TRANSPLANT APPLICATION  
POST GRADUATE TRAINING PROGRAM**



**PERSONAL DATA**

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

CITIZEN OF: \_\_\_\_\_ BIRTHPLACE: \_\_\_\_\_ BIRTH DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Country City/State/Country

VISA STATUS \_\_\_\_\_ VISA TYPE \_\_\_\_\_ Expiration Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTRY \_\_\_\_\_

TELEPHONE No: (\_\_\_\_\_) \_\_\_\_\_ E: Mail \_\_\_\_\_

Person through whom you can be contacted: \_\_\_\_\_

\_\_\_\_\_  
Address City State ZIP Phone No

Are you currently Board Certified?  Yes  No Specialty: \_\_\_\_\_

Board Eligible?  Yes  No

**EDUCATION**

List below in chronological order every college or university you have attended

School	Location	Dates	Degree/Date Received
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MEDICAL SCHOOL: \_\_\_\_\_ YEAR GRADUATED: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

**PROFESSIONAL EXPERIENCES**

(attach extra sheet if necessary)

Hospital/Program	Nature of Appointment	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

**LICENSE**

Do you hold a valid state license?  Yes  No State \_\_\_\_\_ License Number \_\_\_\_\_

List biographical data, papers written, or any item that will strengthen your application. (Attach extra sheet if necessary).

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**INTEREST AREA**

(Describe your possible future professional goals or interests: Other subspecialties, transplantation, social medicine, private practice, clinical or basic research, academic career, other practice/field)

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**PERSONAL REFERENCES**

(List Names and Addresses). Please request the individuals you listed below to submit personal references in support of your application.

1.	_____	_____	_____
	Name	Title	Address/City/State/Zip
2.	_____	_____	_____
	Name	Title	Address/City/State/Zip
3.	_____	_____	_____
	Name	Title	Address/City/State/Zip

I certify that the information given in this application is accurate and complete and to the best of my knowledge. I understand that falsification of information will be sufficient grounds for refusal of admission or for dismissal. If admitted to the University of South Florida, College of Medicine, Post Graduate Training Program, I hereby agree to abide by the policies of the Board of Regents and the rules and regulations of the University Of South Florida College Of Medicine.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

The TGMG-USF One-Year Renal Transplant Fellowship offers a one (1) year fellowship position.  
Accredited by [AST Renal Transplant Fellowship Training Accreditation Committee](#)

Contingent on credentialing clearance and Florida Board of Medicine approval. Must have board certification (or eligibility) in Nephrology.

For International Graduates

All applications will be considered.

The University of South Florida sponsors J-1 Visa's and depending on the situation, we may accept H1B Visa applicants with outstanding USMLE scores.

ECFMG Website  
[www.ECFMG.org](http://www.ECFMG.org)