PENASYLVANI

Allegheny County Office of the Medical Examiner

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MEDICAL STUDENT ROTATION & FORENSIC INTERNSHIP APPLICATION

PLEASE TYPE OR PRINT IN INK

APPLICANT NAME:						
	First	L	AST	M.I.		
PERMANENT ADDRESS:						
	STREET ADDRESS					
	CITY/BOROUGH/TOWNSHIP	STATE	ZIP CODE			
TELEPHONE:		□ Номе	☐ CELL			
E-MAIL:						
SCHOOL NAME:						
MAJOR/CONCENTRATIO	on:					
YEAR IN SCHOOL AT TIME	E OF APPLICATION:					
APPLYING FOR SCHOLAF	RSHIP? TES	S 🗆	NO			
TRANSCRIPTS RESUME/CUF MISSION STAT	E MEDICAL STUDENT ROT	G COURSE WORK A	ND EXPERIENCE	CATION		
ALL SCHOLARSHIP AI GENERAL APPLICATIO SCHOLARSHIF	P APPLICATION MATERIAL: PPLICANTS MUST SUBMIT TON MATERIALS: PESSAY (250 TO 500-WORD) MMENDATION LETTERS FR	RD)		N TO THE		
APPLICATIONS MUST PROOF OF COVID-19	LEASE NOTE THE FOLLOW BE POSTMARKED BY THE D VACCINATION WILL BE RE PLICATIONS INCLUDING ON	UE DATE FOR CON QUIRED IF ACCEPT	ISIDERATION. IED.	ERED.		

PROGRAM SELECTION (PICK ONE)						
MEDICAL ST REQUESTED ALL APPLICA ROTATION T	TERM ATION M	PERIOD: MATERIAL IS D	UE 2 MONTHS PRIC	OR TO THE REQUESTE	:D	
FORENSIC IN SELECT 3 AN	REAS O AUT FOR DRU TOX ENV FIRE TRA LATE EVICE	F INTEREST A OPSY & HISTO ENSIC BIOLO IG CHEMISTRY ICOLOGY IRONMENTAL EARMS	OLOGY / DEATH IN OGY Y CHEMISTRY VING	ORDER OF PREFEREN	NCE1 — 3.	
TERM APPL	YING:	YEAR: SPRING	(JAN — APRIL)	- Application Due E Orientation: 2 nd T		
		SUMMER	(May – Aug)	APPLICATION DUE BY: MAR. 15TH ORIENTATION: 2ND TUESDAY OF MAY		
		FALL	(SEPT — DEC)	Application Due E Orientation: 2 ND T		
Availabilit	y: Indic	CATE WEEKLY	HOURS OF AVAILA	ABILITY IN THE CHART	BELOW	
	T	JESDAY	WEDNESDAY	THURSDAY	FRIDAY	
AM (8-12)				MANDATORY ATTENDANCE		
PM (12-4)						