

SIU Scholarship Application Checklist

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\square Completed and signed application form	
☐ Recent headshot picture in high resolution	on
☐ Medical License #	
☐ Personal statement (respects the word lin	mit)
$\hfill\square$ Training center selected is not the one in	which the scholar is currently training
☐ Training center selected is an SIU-Accredi	ted training institution
\square Scholar speaks, writes and understands \blacksquare	English (at least Intermediate level)
☐ It has been less than 10 years since schol	ar has obtained his/her MD
☐ Specialties of Training Center selected is p	pertinent to the scholar's objectives
☐ Letter of acceptance from the host institu	ition where the scholarship will be conducted
\square At least one (1) letter of recommendation	from programme/department director or
mentor.	
\square Scholar understands that a mid-term and	l post-training reports must be submitted, as
well as an evaluation form.	
Date: S	ignature: