

Department of Radiology Visiting Student Diversity Program

Applicant Information
Name:
Address:
City/St/Zip:
Email:
Phone number:
Ethnicity:
Economically/Socially Disadvantaged? Yes No
Medical Education
Medical School:
Expected Graduation date:
Additional Information:
Birth date:
Birth place:
Have you ever been subject to review, challenges, and/or disciplinary action, formal or
informal, by an ethics committee, licensing board, medical disciplinary board,
professional association or education/training institution?
Yes If yes please explain in separate page
No

Required documents checklist:
1. Application
2. USMLE Step 1 score report; if already taken, Step 2 score report
3. Copy of medical school transcript
4. CV
5. Personal Statement
6. Letter of Recommendation

Personal Statement: In a single page (double spaced, 12 font), please explain why you are interest the field of radiology, why you are interested in the UW radiology program, and describe any prior activities and/or future plans regarding service to underserved patients.

Disadvantaged status (if applicable): Please submit a brief statement (double space, 12 font) detailing how you have overcome any social or economic disadvantages.

Preference will be given to applications received by May15th Selected applicants will be contacted by June 1 Please send all application materials to nguyenk6@uw.edu.