



## Scholarship for Underrepresented Minorities

Department of Emergency Medicine

Name \_\_\_\_\_  
*Last First Middle*

Address \_\_\_\_\_  
*Street City State Zip*

Phone \_\_\_\_\_ Email \_\_\_\_\_

Medical School \_\_\_\_\_

Entrance Date \_\_\_\_\_ Expected Graduation Date \_\_\_\_\_

Gender ☐ Female ☐ Male

Race/Ethnicity\* ☐ African American ☐ Mexican American ☐ Puerto Rican American

☐ Native American ☐ Caucasian American ☐ Asian American ☐ Other \_\_\_\_\_

\*mark all that apply

USMLE Step 1 Score \_\_\_\_\_ USMLE Step 2 CK score (if applicable) \_\_\_\_\_

I am applying to an Emergency Medicine Residency? ☐ Yes ☐ No

Dates of your Yale Sub-Internship \_\_\_\_\_



## Scholarship for Underrepresented Minorities

Department of Emergency Medicine

The Yale Emergency Medicine Residency Program strives for excellence in all areas. We will be offering a scholarship to underrepresented minorities accepted for a Sub-Internship or Ultrasound Rotation at the Yale Emergency Medicine Program. This scholarship will pay up to \$1500.00 to assist with travel, lodging and associated application fees while rotating at Yale-New Haven Hospital.

If interested, please include the following information with your application:

- CV
- Statement explaining your interests in leadership and academics at the time of your VSAS submission

By signing this application, you attest to the accuracy of the information provided.

---

*Signature*

---

*Date*

Please email your completed application to:

- Lisa Courtney  
EM Residency Program Coordinator  
[lisa.courtney@yale.edu](mailto:lisa.courtney@yale.edu)

For any further information or questions please contact Lisa Courtney at [lisa.courtney@yale.edu](mailto:lisa.courtney@yale.edu)