



HEART AND VASCULAR INSTITUTE
STRUCTURAL HEART DISEASE FELLOWSHIP
2139 Auburn Ave. | Cincinnati, OH 45219
513-585-2656

APPLICATION DOCUMENTS

- 1- Completed application form
- 2- Three (3) letters of recommendation. One must be in reference to CV Lab Skills.
- 3- Foreign Medical Graduates should send only **one** copy of your ECFMG Certificate with your application
- 4- USMLE/COCATS Transcripts
- 5- CV
- 6- A Personal Statement
- 7- Photo

All information can be scanned and emailed to Lisa Ambach, Program Coordinator
lisa.ambach@thechristhospital.com

Application Date:

Name: Last

First

Date of Birth:

Place of Birth:

SSN:

Home Address:

Home phone:

Cell phone:

Work phone:

Personal email address:

