

Scholarship Application

Mayo Clinic Echocardiography Review Course for Boards and Recertification

June 9 – 12, 2018 • Rochester, Minnesota

Deadline: April 6, 2018

Requirements *(all documents must be submitted together):*

- Completed application form
- Letter of recommendation from training director
- Personal statement of career interest from applicant
- Current curriculum vitae

Scholarship provides course registration fee only.

The recipient is responsible for air travel, lodging accommodations, and all other incidentals associated with attendance.

Applicant Information:

Name: _____ Institution: _____

Mailing Address that you would like correspondence mailed to:

Home Address Work Address

Institution: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: _____ E-mail: _____

Fellowship Details:

Month/Year Completed: _____ / _____

Training Program Director Information:

Name: _____ Institution: _____

E-mail: _____ Phone: _____

Return Application by April 6, 2018 to:

Mayo Clinic – EBR Scholarship Program

ATTN: Ms. Deborah Feils

200 1st Street SW – Gonda 6-472

Rochester, MN 55905

E-mail: feils.deborah@mayo.edu

**NOTE: Submit application only once. US Mail or Email are both acceptable.
All pieces of application must be received together – do not submit separately.**

There is no need to mail application if you've already submitted via email.