

**UNITED STATES AIR FORCE
374 MEDICAL GROUP
YOKOTA AIR BASE, JAPAN**

**JAPANESE PHYSICIAN FELLOWSHIP PROGRAM
(JPFP)**

APPLICATION 2021-2022 CYCLE

Name:

Gender:

Address:

Name (Kanji):

Address (Kanji):

Email:

Telephone

Home:

Cell:

Hometown:

Date of Birth (dd/mm/yyyy):

Medical University:

Address:

Telephone:

Graduation date:

Honors and research:

USMLE Scores (If available)

Step 1

Score:

Step 2

Score:

TOEIC score or equivalent English level Score:

HAVE YOU EVER TAKEN TIME OFF OR HAD A LEAVE OF ABSENCE FROM YOUR UNIVERSITY FOR MEDICAL, PSYCHIATRIC, OR PERSONAL REASONS? IF YES, PLEASE EXPLAIN IN DETAIL.

Please tell us about yourself in a personal statement of approximately 1-2 pages in length. Include information about how training at the 374 Medical Group Hospital relates to your personal goals.

Please include a recent photograph of yourself in passport style. Official passport photo not required.

Email completed file as an attachment.