Diversity Scholarship Application

Dear Applicant,

We welcome qualified applicants to apply for a scholarship to participate in a dermatology elective in our department. During this elective, you will be exposed to the many aspects of dermatologic diagnosis and treatment by actively participating in the ambulatory and inpatient programs. The elective is conducted in all three departmental services: The Skin and Cancer Unit at the Ambulatory Care Center, Bellevue Hospital Medical Center, and the New York Harbor Healthcare System - Manhattan Veterans Administration Hospital. The rotation includes a medical student lecture series and daily teaching conferences. At the end of the general dermatology elective, you should be able to properly perform a history and physical examination of a patient with skin disease, describe the morphology of skin diseases, recognize common skin conditions and their treatments, and determine when it is appropriate to refer patients to dermatologists or other specialists.

The Diversity and Inclusion program within the Ronald O. Perelman Department of Dermatology is overseen by Dr. Nada Elbuluk. In order to apply for the scholarship, you must be a rotating medical student in a regular 4 week rotation (you must be within the fourth quarter of your third year or within the fourth year) be a US citizen from an accredited American allopathic medical school, be in good academic standing, and complete the clerkship. The scholarship is in the amount of $2,000 and will be paid at the successful completion of the four (4) week elective in dermatology.

Prior to completing this scholarship application, you should first apply to a Dermatology rotation via the NYU School of Medicine registrar at med.nyu.edu/departments-institutes/dermatology/education/medical-student-training. Upon completion, you should complete this application and attach a copy of the requested additional documents including CV, transcript, letter of interest, and letter of recommendation.

Please send completed application to the attention of:

Craig Burke, Project Associate
NYU Grossman School of Medicine
The Ronald O. Perelman Department of Dermatology
240 East 38th Street, 11th Floor
New York, NY 10016
Telephone: (212) 263-5245
Fax: (212) 263-8752
Email: craig.burke@nyu-langone.org
Application:

NAME: ___________________________    DATE:__________________

ADDRESS:__________________________________________________

PHONE:_____________________________________________________

EMAIL:_____________________________________________________

GENDER:___________________________________________________

DOB:_______________________________________________________

MEDICAL SCHOOL:__________________________________________

CLASS YEAR:_______________

STEP 1 SCORE:_______________

RACE/ETHNICITY:     Black   Hispanic/Latino: (Describe)_____________
                     African    Native American:(Describe)___________
                     African-American Pacif Islander: (Describe)_________
                     Caribbean- American Other: (Describe)_____________

☐ YES  ☐ NO  Do you intend on applying for a Residency in Dermatology?

Additional components of application:

1. CV

2. Letter of Recommendation (from medical school and/or physician advisor)

3. Medical School Transcript

4. Letter of Interest
   a. Please include why you would like participate in an elective in dermatology at NYU, your career goals/interests, and a statement of financial need as part of this letter.