Clinical Scholars Program
Application Instructions

Program Overview
The Clinical Scholars Program expands the Cedars-Sinai education and training for junior faculty, residents and fellows. The goal of the program is to educate physicians and other doctoral-level clinical healthcare professionals in broad foundations of clinical and translational research, with a spirit of creativity and independence, so as to optimize their chances of becoming productive clinical researchers. This includes highlighting the relevance of basic scientific knowledge to human disease, teaching how such knowledge can be effectively translated into research, and developing clinician-investigators focused on research related to prediction, prevention, diagnosis and treatment of human disease.

Application Process & Admission
Requirements for admission include a baccalaureate degree (or its foreign equivalent) plus an M.D. or similar health-related doctoral degree. High academic achievement and considerable interest in a career as a clinical investigator are required.

All Applicants must complete the “Clinical Scholars Application Form,” which includes items 1-6 below.

1. Clinical Scholars Application form (see page 2)
2. A current C.V.
3. Personal statement of career goals
4. A letter of recommendation from the Division Director, Departmental Chair, or Institute Director indicating the financial support and protected time being provided during the didactic and research years of the program. The letter must specifically state the source of the support.
5. A letter of commitment by the applicant’s research mentor(s)
6. A brief (2-3 page) description of the research project that you will be working on during the program.

All of the above information (items 1-6) should be sent to the address below and an interview with the Program Director will then be scheduled:

Emma Yates Casler * (310) 423-8171 * yatesec@cshs.org
Clinical Scholars Program Coordinator
8700 Beverly Blvd, Atrium Building, 2nd Floor
Los Angeles, CA 90048
CEDARS-SINAI MEDICAL CENTER
CLINICAL SCHOLARS PROGRAM APPLICATION

Name: ______________________________________________________________________
Address:______________________________________________________________________
______________________________________________________________________________

Phone:__________________________________  email:________________________________
Dept:___________________________________  Pager: _____________________________
Current Position:________________________________________________________________

Medical School or other Health Professional School: ___________________________________
Internship:_____________________________________________________________________
Residency:_____________________________________________________________________
Fellowship:____________________________________________________________________
Degrees:______________________________________________________________________

Please submit this completed form along with items 1-7 (page 1) to:

Emma Yates Casler
yatesec@cshs.org
8700 Beverly blvd, Atrium bldg, 2nd floor
Los Angeles ca 90048

“I certify that the information in this application is true and correct to the best of my knowledge.”

Signature: _______________________________  Date: __________________________

NOTE: Incomplete applications will not be reviewed. Interviews are scheduled by invitation only