

SUPPLEMENT TO APPLICATION FOR BOSTON MEDICAL CENTER AND BOSTON UNIVERSITY DERMATOLOGY APPLICATION (FOR RESIDENCY BEGINNING JULY 1, 2022)

Please provide answers to all of the following questions:

- 1) <u>Question</u>: Tell us why you are specifically interested in our academic training program in Dermatology. What would you hope to someday contribute to our specialty?
- 2) <u>Question</u>: Tell us why you are interested in training at Boston Medical Center/Boston University/Boston area. What features of our institution and the City of Boston fit with your interests and goals?
- 3) <u>Question</u>: Provide your definition of integrity and detail a time where you demonstrated this trait.
- 4) <u>Question:</u> The coronavirus pandemic of 2019-2020 was lifechanging for all of us. Describe how you contributed to your medical center or community or family during this crisis.
- 5) <u>Question</u>: Boston Medical Center is the safety net hospital of Boston. A large proportion of our patients are socioeconomically disadvantaged. Tell us about your experience and/or interest in working with underserved communities.

<u>Please be sure to include your name and AAMC#, and to number your responses accordingly</u>. Supplements should be sent as <u>ONE</u> Word document or PDF (preferred) labelled with your last name and AAMC# in the following format: LastNameAAMC#.pdf. Please send via email to dermtrng@bu.edu by Sunday November 1, 2020, 5:00 PM EST.