

2024 Student Enhancement Program Application Form

1. **Name:** _____

2. **Email:** _____

3. **City/Town:** _____

4. **Dates Available:** February 24 March 2

5. **Medical School(s) being interviewed for (please list all schools):**

6. **Rural Connection (please include all relevant information where there is a rural connection):**

Please send completed forms to ruralmedicine@albertadoctors.org by February 19, 2024.

NOTE: The number of spaces for the Student Enhancement Program is limited, so priority will be given to individuals who have received an invitation for an interview at a medical school. Proof of interview invitation may be requested.