

University of Virginia School of Medicine Department of Psychiatry and Neurobehavioral Sciences

Postdoctoral Fellowship in Clinical Neuropsychology

Application form (Please type)

Date:			
1. Identifying Information:			
	Name:		
	Address:		
	Phone:	Email:	
	Country of Citizenship: Non-US Citizen Visa Status:		
	Does this visa permit you t		
2.	. Education & Training:	Y N	
	Pre-Doctoral Internship:		
	Dates:		
	APA/CPA Accredited?	N	
	Graduate Program:		
	Dates:	Specialty Area:	
	Doctoral Degree:		
	Dissertation Title:		
	Date of Defense:		

3. Submit three letters of recommendation

Letters should be from those familiar with your academic, clinical, and/or research training (List names and affiliations here)

4. Additional Application Requirements

- Please include a cover letter that describes your **clinical interests**, **research interests**, and **goals for fellowship**.
- Include a copy of your current curriculum vitae.
- Submit a copy of your graduate degree program transcripts. Unofficial transcripts are acceptable and a copy of your official transcripts will be required if matched with our program. Undergraduate transcripts are not required.
- Please note that hospital policy states all incoming house staff must pass a background check and drug screening as a condition of employment. Please do not hesitate to contact us with any questions about this requirement.