

AOGME COLLEGIUM OF FELLOWS NON-PHYSICIAN APPLICATION

As of January 1, 2018, the Association of Osteopathic Directors and Medical Educators (AODME) became part of AACOM as the Assembly of Osteopathic Graduate Medical Educators (AOGME). Activities you engaged in as an AODME member will count as AOGME activities.

NAME:				
Last	First	Middle Initial	Date of Birth	
ADDRESS:				
Organization	/Educational Institution/P	rogram		
Stre	et	City	State Zip	
Telephone:	Fax:	Ema	il:	
TITLE:		Date Started:		
UNDERGRADUATE EDUCAT	ION:			
College/University	Degree	;	Dates	
College/University	Degree)	Dates	
GRADUATE EDUCATION:				
College/University	Degree	9	Dates	
College/University	 Degree	;	Dates	



POSTGRADUATE TRAINING AND DATES: Fellowship(s): Assistantship(s): Teaching Appointment(s): Other Hospital Affiliation (Dates & Current Status): PROFESSIONAL MEMBERSHIP(S): (Professional Society, Academic Organization, etc.) ______ Membership Dates: _____ _____ Membership Dates: _____ Membership Dates: _____ Other (List Effective Dates): Applicant's Signature: Date: SPONSORSHIP: Please list the name and address of your sponsor from the Collegium. I have reviewed this application and documentation and feel that it is complete.* Sponsor's Signature:_____ Date:

PLEASE REMEMBER TO SUBMIT YOUR \$100 APPLICATION FEE, C.V. AND OTHER DOCUMENTATION OF YOUR ACTIVITIES BY DECEMBER 1, 2024. PLEASE SEND DOCUMENTS TO AOGME@AACOM.ORG.

*Per Par. 5.3, Regulations Governing Fellowship, please attach a letter of support from the Collegium Fellow Sponsor.