The Alfred and Gail Engelberg Department of Family Medicine and Community Health





Interprofessional Program in Integrative Health

Application Form
Date:
How did you learn about our program?
Personal Statement
1) Briefly tell us about you and your practice. (150 words or less)
2) Please define what Integrative Medicine means to you and how you plan to implement it into your daily practice. (250 words or less)

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Demographic Information

We use this part of the application for our records. Except for our education requirement of a Master's Degree or above, your answers to the questions below will not affect our decision about your application. We use your contact information so we can send you information about the program. We ask for your demographic information so we can assess whether we are succeeding in our efforts to make the program accessible to participants of all identities. We will keep your information private.

ed
Name (First Last):
Email:
What degree(s) do you hold?
nal
Nickname:
DOB (MM/DD/YYYY):
Phone:
Pronouns:
☐ She/her/hers ☐ He/him/his ☐ They/them/theirs ☐
What is your sex or current gender? (Check all that apply)
□ Male
□ Female
□ TransMale/Transman
□ TransFemale/Transwoman
☐ Genderqueer
□ Additional Category (Please Specify):
□ Decline to State
What sex were you assigned at birth?
□ Male
□ Female
□ Decline to State

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10) Race or Ethnicity Select all boxes that apply and print ethnicities. Note, you may report more than one group. ☐ American Indian or Alaska Native—Print, for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc. Asian—Print, for example, Chines, Filipino, Asian Indian, Vietnamese, Korean, Japanese, etc. ☐ Black or African Am.—Print, for example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc. □ Native Hawaiian or Other Pacific Islander—Print, for example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese, etc. ☐ Middle Eastern or North African—Print, for example, Lebanese, Iranian, Egyptian, Syrian, Moroccan, Algerian, etc. ☐ Hispanic, Latino, Spanish—Print, for example, Mexican or Mexican American, Puerto Rican, Cuban, Salvadoran, Dominican, Colombian, etc. ☐ White—Print, for example, German, Irish, English, Italian, Polish, Fench, etc. ☐ Some other race or ethnicity—Print race or ethnicity. 11) Working Status: ☐ Part-time work ☐ Full-time work ☐ Academic work (student) ☐ Unemployed; seeking work □ Sustained another way; not seeking work (ex: retirement, benefits)

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