ENDOSCOPY LEARNING







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To apply:

- 1. Return this form with your CV and a passport-size photo via fax, email or express mail to Sara Stello.
- 2. Written confirmation will be sent after receipt of the above items.

Observers will be charged as follows: 1-3 weeks − \$500 per week

3. If you are international, you are responsible for obtaining a B-1 visa in your home country after your visit has been approved and confirmed by the MUSC Digestive Disease Center.

1-3 months — \$1800 per month (less than \$450 per week) 4-6 months — \$1600 per month (less than \$400 per week)

7-9 months — \$1400 per month (less than \$350 per week) 10-12 months - \$1200 per month (less than \$300 per week)			
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Last name:		First name:	
Place of primary degree:			Year:
Place of formal GI training:			Year:
Name/address of current institution	n/practice:		
Position at current institution/prac	tico:		
rosition at current institution/prac	ilice.		
Phone:		E-mail:	
Home address:			
Special areas of interest:			
What are your goals and objective	s during this visit?		
How did you been about our progra	om2		
How did you hear about our progr	am ?		
Dates requested/available:			
Are your dates at all flexible? Requests are on a first come basis. We are at limited on space availability, so flexibility is imp			