Conrad Smith Leadership Council (CSLC) Application

Please fill out the following information.

Personal Infe	ormation					
Full Name:						
Preferred Name:						
Address:						
Phone:						
Email Addres	s:					
Birth Date:			Birth Pl	ace:		
U.S. Citizen o	r Permanent	Resident	Yes	No		
Gender	Man	Woman	Othe	r Self-Identity:		
Ethnic Background (select all that apply)						
Alaska Native				Asian		
Black or African American				Hispanic, Latinx, or Spanish Origin		
Native American or American Indian				Native Hawaiian or Pacific Islander		
Two or More Ethnicities				White		
Other Self-Identity:						
Educational Background						
Medical School:						
Medical School Graduation Date:						
Residency Program/ Track:						
Residency Program Start Date:						
The following documents must be submitted for consideration:						
Curriculum Vitae (CV)One letter of recommendation						

How did you hear about the Conrad Smith Leadership Council (CSLC)?

The Conrad Smith Leadership Council (CSLC) aims to significantly increase our capacity to provide healthcare equity in our region. Tell us about your specific interest in health disparities and how you plan on contributing to health equity in the future. What plans do you have to address this issue? (750 words maximum)

If you become a CSLC member, how do you plan to allocate your funds and use those resources to contribute to your long-term goals? (750 words maximum)

Your signature below indicates that you have completed this application and you have provided accurate information.

Signature D	Date
	Juic

Please submit this application and supplementary materials to Rayni Shiring at <u>rms265@pitt.edu</u> by **Thursday**, **August 1, 2024 by 11:59pm**. Applicants will receive confirmation that the Office of Diversity, Equity, and Inclusion received their application.