

Part IV: Other

1. References: List the name, title, and phone number of three persons who know your professional or academic competence and whom you have asked to send letters of recommendation. Additional references may be submitted. Please have your references submit their letter of recommendation to the address below.

Last Name	First Name	Title	Phone Number

2. I certify that the information submitted herein is true and correct to the best of my knowledge. I understand that willfully withholding information or making false statements in this application may be used as the basis for denial of admission or for dismissal.

Signature

Date

Part V: Personal Statement

On a separate piece of paper, please explain your overall qualifications for admission into this program and how you plan to contribute to the field of Medical Dosimetry. Your Personal Statement should be typed with a legible font, on letter size paper (8.5" x 11"), and adjusted to the following margins: 1" top and bottom, 1" left and right.

Attach your personal statement to your completed application. Your complete application should include: this completed Application for Admission form, your Personal Statement, and college transcript. Recommendations should be sent separately by individual references utilizing the form provided. Complete applications need to be received by March 1, 2010.

Please send completed applications to:

Christina Mason
Department of Radiation Medicine
Roswell Park Cancer Institute
Elm and Carlton Streets
Buffalo, NY 14263