**MSU-IGH Global Health-Observership**

Application form for Observership

* 1. Last (sir) name: , First (given) name:
	2. Period applying for participation (how many weeks do you like to stay at MSU):
	3. Expected arrival date(mm/dd/yyyy):
	4. Gender (sex):
	5. Date of birth(mm/dd/yyyy):
	6. Birth city & country: ,
	7. Contact information:
		1. Email:
		2. Cell phone number:
		3. Address:
	8. School name, city, & country:
	9. What year are you?
	10. Interests(internal, family, OB/Gyn, ER, etc.):
	11. Emergency contact information:
		1. Name:
		2. Relationship:
		3. Email:
		4. Cell phone number:
	12. Housing (dorm or off-campus apartment):
	13. E-Mail all your documents to:
		1. Email: igh@msu.edu
		2. Tel.: +1-517-930-9394
		3. Website: ighealth.msu.edu
		4. Address: Sung Soo Chung, MSU-IGH

909 Wilson Rd., Room B320 W. Fee Hall

East Lansing, MI 48824, U.S.A.