**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](mailto:igh@msu.edu)
      2. Tel.: +1-517-930-9394
      3. Website: ighealth.msu.edu
      4. Address: Sung Soo Chung, MSU-IGH

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