



# Administrative Fellowship Program Application Form

**Instructions:** Complete this form and submit it with other application materials as directed on our website.

## Applicant Information

Name <i>(Last, First)</i>		Graduate Academic Institution/Pending Degree	
Current Graduate School GPA	Graduate School Graduation Date <i>(mm-dd-yyyy)</i>	Undergraduate Academic Institution/Degree	Undergraduate Cumulative GPA

1. Share your key attributes and strengths that make you an ideal candidate (highlight up to three).
2. Briefly highlight two to four experiences that have prepared you for an administrative fellowship.
3. Describe your career goals and your professional inspiration.
4. Why are you interested in the Mayo Clinic Administrative Fellowship?
5. Please share your values as they align with the values of Mayo Clinic.

Please **number your responses** to correspond to each statement or question. (1,000 total words maximum)

Continue on page 2 if necessary.

Name *(Last, First)*

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