

## John A. Burns School of Medicine Freeman Scholars application for 2024-25

*Please attach your CV to this application			
Last Name:	First Name:	MI:	
Phone number:	Email:		
Current mailing address:			
Are you a JABSOM MD alum?		Yes No	C
Do you have a minimum of \$40,000 in qualified educational loans?		Yes No	D

If I am selected, I authorize the JABSOM Financial Aid Office to verify my qualified educational debt is in excess of \$40,000

Please describe why you chose to train in Hawaii for your residency and/or fellowship (max 250 words)

Please describe your plans to serve in Hawaii post-training (max 250 words)

I acknowledge that I have reviewed the Freeman Scholars Program Overview

Resident/Fellow signature:

Date:

Submit completed application to your program director by July 1