### Honorary Clinical Fellowship / Clinical Observership

### Application Form

You may refer to the website for the list of honorary fellowship programs that we currently offer, eligibility info, and other information :   
[Honorary Clinical Fellowship and Clinical Observership | National University Hospital (nuh.com.sg)](https://www.nuh.com.sg/research-and-education/honorary-clinical-fellowship-and-clinical-observership)  
  
Please also provide us a copy of your CV when emailing this form to us.

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| **Department** |  | **Requested Posting Duration** (6 – 12 months) |  |
| **Name of Training Program** |  | **Preferred Commencement Month** (9 months processing time) |  |
| **Sponsoring Institution** |  | **Will you be funded by any institution?** If yes, please name institution. |  |

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| Applicant Particulars | | | |
| **Full Name:**  *(underline surname)* |  | | |
| **Gender:** | Male / Female | **Citizenship:** |  |

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| Basic Medical Degree (MBBS equivalent) | | | | |
| **Name of Institution** | **Country** | **Qualification attained** (e.g. MBBS) | **Period of Course** | |
| **From (MM/YY)** | **To (MM/YY)** |
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| National Licensing Exam (NLE) | |
| **Country** | **Year of Passing** |
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| Housemanship / Internship | | | | |
| **Name of Institution** | **Country** | **Department(s)** | **Period** | |
| **From (MM/YY)** | **To (MM/YY)** |
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| Postgraduate Medical Degree / Residency / Fellowship / Other Training Programs | | | | |
| **Name of Institution** | **Country** | **Qualification attained** (e.g. Master’s) | **Period of Program** | |
| **From (MM/YY)** | **To (MM/YY)** |
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| Medical Registration License | | | |
| **Name of Medical Council** | **Country** | **Year of Active License** | |
| **From (MM/YY)** | **To (MM/YY)** |
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| Clinical Work Experience (minimally last 3 years required) | | | | | | |
| **Name of Institution** | **Country** | **Department** | **Designation** | **No. of Working Hours per week** | **Period of Employment** | |
| **From (MM/YY)** | **To  (MM/YY)** |
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| Posting Objectives (compulsory, if no letter of objectives) |
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