# Program in Clinical Effectiveness

# 2014 Application Supplement Form

**Required for all degree and non-degree applicants:**

This form must be completed by all PCE applicants (degree and non-degree) and e-mailed to [ProgClinEffect@partners.org](mailto:ProgClinEffect@partners.org). Please note this form is a supplement to your degree or non-degree SOPHAS application and application materials. Applications will not be reviewed by the PCE Admissions Committee until all components are received.

## Name:

## Prefix First Middle Last Suffix

E-mail:

**Appointments/Affiliations as of July 1, 2014:**

Academic Appointment

(Fellow, Professor, etc)

Academic Affiliation

Hospital Affiliation

Anticipated Source of Summer Tuition

(Division/Department and Institution)

**Degree Status:**

Are you a current degree applicant?

(Yes/No)

If so, which program have you applied to?