

PHILADELPHIA VAMC PHYSICIAN ASSISTANT RESIDENCY IN EMERGENCY MEDICINE



Corporal Michael J. Crescenz Veterans Affairs Medical Center
3900 Woodland Avenue
Philadelphia, PA
(215) 823-5800
<http://www.philadelphia.va.gov>

Return application and all supporting documents via email to:

Eric Rousell, PA-C, CAQ-EM
Emergency Department
Eric.Rousell@va.gov

Notes:

- Applications are due by February 03, 2025. Interviews will begin early spring 2025.
- Prior to beginning the program, applicants must graduate from an ARC-PA accredited program and be NCCPA certified.
- This program involves rotations at Philadelphia-area medical sites and will require a Pennsylvania state license.
- Applicants must be US Citizens
- A personal essay is required

Applicant Information:

Name (Last, First, Middle)

Address

Telephone (Home)

Telephone (Cell)

Birth date (MM/DD/YYYY)

E-Mail

Emergency Contact

Do you have any conditions that might impair your participation in this program? If so, please describe.

Have you ever used any other name(s)?

Education and Experience (attach additional sheet(s) if necessary):

High School	Name		From	To	
	Address				
College	Name		From	To	Degree
	Address				
PA Program	Name		From	To	(Exp.) Grad. Date
	Address				
	Degree		Research or Thesis Topic, if applicable		
Previous Residency (if applicable)	Name		From	To	Field
	Address			City and State	
Other graduate degree (s) (if applicable)	College		From	To	Degree(s)
	Field(s)				
Relevant Clinical Experience Use additional sheet if necessary	Location			From	To
	Type				
	Location			From	To
	Type				
Complete Licensing History (if applicable) Use additional sheet if necessary	State	Type (Full, Standard, Limited, Restricted)	Status	Dates	
	State	Type	Status	Dates	

Have you ever:

- ☐ Been denied a license
- ☐ Had your Scope of Practice limited
- ☐ Had a license revoked or suspended
- ☐ Been denied hospital privileges
- ☐ Had hospital privileges limited or suspended
- ☐ Been reported to National Provider
- ☐ Had other licensure issues
- ☐ Been disciplined for academic performance

If any of the above apply, please attach an additional sheet with explanation.

NCCPA Certification or Eligibility: _____

NPI #: _____

(If not yet certified, please list date of scheduled PANCE)

Membership in honorary or professional societies, prizes, awards, fellowships, etc.:
(attach extra sheet if necessary)

Publications and Faculty Appointments: If applicable, please list publications and/or faculty appointments on a separate sheet or include in CV.

Professional References:

- Please request two (2) professional letters of evaluation to be emailed to the address above.
- It is encouraged that one letter be from the PA Program Director or supervising physician.
- Please request that evaluators comment on academic and personal attributes including judgment, industry, interpersonal relations, capacity to assume responsibility and professional ethics.

Reference 1	Title
Reference 2	Title

Personal Statement:

A personal essay is required stating your personal motivations and professional goals in the field of emergency medicine.

Checklist:

(Please check off and list date information was sent via email)

- _____ Unofficial PA program transcript
- _____ Unofficial transcripts from any other *graduate-level* programs attended.
(Undergrad transcripts NOT needed)
- _____ GRE scores, if GRE has ever been taken
- _____ Documentation of NCCPA certification, if applicable
- _____ CV or resume
- _____ TWO letters of recommendation
- _____ Personal statement

Proof of US citizenship will be required prior to acceptance into program.

Following the receipt of all documents, competitive applicants will be invited to participate in an interview.

I certify that to the best of my knowledge the above information is accurate and correct:

Signature: _____ Date: _____