



COLLEGE OF OSTEOPATHIC MEDICINE

Application for Clinical Faculty Appointment

APPOINTMENT DESIRED IN DEPARTMENT OF:

- Family & Community Medicine
- Osteopathic Manipulative Medicine
- Osteopathic Surgical Specialties
- Physical Medicine & Rehabilitation
- Radiology
- Neurology & Ophthalmology
- Osteopathic Medical Specialties
- Pediatrics
- Psychiatry
- Other (specify _____)

NAME (last, first, middle initial): _____

PREFERRED MAILING ADDRESS: Home Office Other

(Street/City/State/Zip) _____

SECONDARY MAILING ADDRESS: Home Office Other

(Street/City/State/Zip) _____

BUSINESS PHONE: _____ HOME PHONE: _____

FAX: _____ E-MAIL: _____

SOCIAL SECURITY NUMBER: _____ GENDER MALE FEMALE

DATE OF BIRTH: _____ NATIONAL PROVIDER IDENTIFIER (NPI) CMS TYPE 1: _____

AOA NUMBER: _____ AMA NUMBER: _____

CITIZENSHIP: US Citizen Permanent Resident Non-Resident Alien Foreign National Type of Visa _____

ETHNICITY: Of Hispanic/Latino Origin Not of Hispanic/Latino Origin

PLEASE CHECK AT LEAST ONE STATUS, AS WELL AS ALL THAT APPLY:

- American Indian or Alaskan Native
- Hawaiian PI
- Asian
- White
- Black or African American

PREVIOUS UNIVERSITY EXPERIENCE (Institution, position, years): _____

ANY RELATIVE EMPLOYED BY MSU? No Yes (if yes, name, relationship, title, dept _____)

CURRENT EMPLOYER: _____

EDUCATION:	Degree Earned	Major Field of Study	Institution	Year
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

INTERNSHIP: Institution _____ Start Date _____ End Date _____

RESIDENCY: Specialty _____ Institution _____ Start Date _____ End Date _____
Specialty _____ Institution _____ Start Date _____ End Date _____

FELLOWSHIP: Specialty _____ Institution _____ Start Date _____ End Date _____

LICENSES: License Number _____ State _____ Date Issued _____
License Number _____ State _____ Date Issued _____
License Number _____ State _____ Date Issued _____

BOARDS: Certified? Yes No Specialty _____ Date Issued _____
Certified? Yes No Specialty _____ Date Issued _____
Eligible? Yes No Specialty _____ Date _____

PRIVILEGES: Hospital _____ City/State _____
Hospital _____ City/State _____
Hospital _____ City/State _____

HAVE YOU EVER BEEN INVOLVED IN THE FOLLOWING: Treated for an addiction? No Yes
Convicted for a felony? No Yes
Had your state license revoked? No Yes

If yes to any of the above, please explain _____

DID THE MEDICAL FACILITY WHERE YOU ARE PRIVILEGED AND CREDENTIALLED CONDUCT A CRIMINAL BACKGROUND CHECK (CBC) FOR YOUR EMPLOYMENT?

Yes - NAME OF HOSPITAL CBC CONDUCTED AT: _____

No - If you have not had a CBC – it is now mandatory that the department facilitate that prior to finalizing your appointment. The department will be contacting you to follow-up.

****PLEASE SIGN ATTACHMENT A: DISCLOSURE OF RELEVANT BACKGROUND INFORMATION UNPAID FACULTY/ACADEMIC STAFF APPOINTMENT.**

PLEASE ATTACH THE FOLLOWING ITEMS TO THIS APPLICATION:

- CV or Resume
- Copies of advanced degree(s)
- Copies of license(s)
- Two letters of professional reference
- Attachment A: Disclosure of Relevant Background Information Unpaid Faculty/Academic Staff Appointment

WHEN YOU SIGN BELOW, YOU ACKNOWLEDGE THAT TO THE BEST OF YOUR KNOWLEDGE THE INFORMATION PROVIDED IN THIS APPLICATION IS CORRECT.

Signature _____ Date _____

**Thank you for your interest in a clinical faculty position within the
Michigan State University College of Osteopathic Medicine.
If at any time you have questions regarding the status of your application
or the MSU College of Osteopathic Medicine,
please do not hesitate to contact MSUCOM Business Office at 517.353.5470**

PLEASE RETURN TO:

**MSUCOM Business Office
East Fee Hall
965 Fee Road, Room A317
East Lansing, MI 48824**

Or via fax 517.432.6793

**Attachment A: Disclosure of Relevant Background Information
Unpaid Faculty/Academic Staff Appointment**

Final approval for your appointment rests solely with the Department Chairperson. As part of the final approval process of your appointment, the University will conduct a criminal background check, including degree verification, or, in lieu of conducting a check for those with unpaid clinical appointments, may rely on the checks conducted by the hospital/medical facility where you volunteer for MSU and are privileged and credentialed, and/or hold regular employment. Any falsifications related to your degree or academic credentials may constitute grounds to revoke your offer of appointment.

Additionally, I must inform you that the decision to recommend an academic appointment takes into account all available information regarding an applicant's professional and personal conduct. Your appointment is contingent on the University having your cooperation in learning information needed to assess your candidacy. For this reason, the University requires you to disclose all relevant facts needed to give the University a full and fair understanding of any past conduct that could adversely affect your ability to fulfill successfully your responsibilities with the university, including:

- 1) professional misconduct or sanctions (e.g., debarment by a federal agency; any form of professional discipline or license restriction or surrender; and admission or determination that you have committed research misconduct);
- 2) any formal employment disciplinary action;
- 3) any civil rights violation that you admitted or were determined by a court or other adjudicative process to have committed (e.g., sexual or racial harassment or discrimination); and/or
- 4) any felony crime for which you were arrested and charged or any serious crime (e.g., drug distribution; sexual offenses; violence involving physical injury to another person; child abuse, molestation, or child endangerment; theft or embezzlement) for which the you were convicted or pled "no contest."

Finally, during the course of your appointment, if any of these arrests, conviction or events occur, you are required to self-disclose this information within 72 hours or at the earliest possible opportunity via the Michigan State University Self-Disclosure Form located on the HR website at hr.msu.edu.

Engagement in any such conduct will not, in and of itself, disqualify you for an appointment at the University or result in termination of your current appointment. But, your failure to disclose such information, or any misrepresentation you make in connection with the disclosure, would be grounds to revoke your offer of appointment or terminate your current appointment.

Acknowledged:

Signature

Date