NOTE TO PROGRAMS: Resident transfers must be submitted to CPME for review by the RRC chair

within 30 days of the <u>CPME 330</u> or	the residual the r	dent's official 5 and the <u>CF</u>	PME Resident Transfe	e on Resident Transfers car r form must be submitted.	
~~~~~~~		Avai	lable Residency Po	ositions	
Residency Progra					
Name:	070	~ Mod	ical Center		
City:	and	1	State 8	& Zip: PA	
	[-1	1			
Available Position	s: PMSR	PMSR/RRA	Program Year (PGY)	# of Available Positions	
	PIVISK	FMSKKKA	P ( V - 1	2	
		V	16/1		
Positions Open To					
All Applicants      CASPR Applicants Only					
Only graduates from the following colleges:					
Contact Informatio	<u>n:</u>				
Contact Name:	. 1	111	Phone:	Email:	k. 0
Alternate Contact		ocki	610 447 ~ 2 ⁻¹	767 diane Wyson	CI (20028. Or
Chief R		ete	-	Crozespodia	ty Denail c
Application Materia	als Requ	ired: ,		· ·	103
CASPR Application V / Current MAVs					
NBPME Scores  Clinical Evaluations  Other  Deadline for receipt of materials					
Transcripts					
Submit Application	by:	1		,	1.0
Email To:	iané.	wysock	(0) Closer (x)	Fax To #: 610 -61	9-7409
☐ Postal Mail To:					
			0.0		
Interview Schedule Plan: as Needed					
Interview ochedale	1 iaii				
Additional lastes (	ionalCa-	nmente:			
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