

SUBURBAN HOSPITAL  
DEPARTMENT OF PHARMACY SERVICES

**Check out our Residency Website:** <http://www.suburbanhospital.org/Careers/PharmResidency.aspx>

Application for Residency in Pharmacy Practice (PGY1)

*Please type or print legibly (you may also request this form as a Word document)*

ASHP Residency Matching Program applicant code number: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle Initial

Preferred contact method January - March:  E-mail  Phone  Other: \_\_\_\_\_

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A completed application file is necessary before scheduling for an onsite interview can occur. A complete file includes receipt of the following items **no later than January 16<sup>th</sup>**.

Official Checklist

- This signed application form**
- A Suburban Hospital employment application form**
  - **Check One:**
    - **Completed online**
    - **Included in application packet**
- Official transcripts from all professional pharmacy education programs\***
- A copy of your current Curriculum Vitae or resume that includes at least**
  - Contact and address information
  - Colleges and Universities attended and degrees conferred or expected
  - A listing of scheduled and completed clerkships, including length of experience and site
  - Pharmacy work experience including unpaid or volunteer work
  - Professional memberships and offices held
- Recommendations from three references\***
  - The "Recommendation Request for Applicant to Pharmacy Residency Program" form is **required**. Letters of recommendation are optional. Preferably, at least two of your references should address your patient care skills.



□ **Your personal statement/Cover letter**

- We understand that applicants are more than the sum of their CV, work history, and academic record. The personal statement is an opportunity for applicants to share with the selection committee other important information about themselves.
  
- Please include in your personal statement:
  - Why do you want to do a pharmacy practice residency?
  - Why am I interested in the Suburban Hospital residency program?
  - What attributes make you an outstanding candidate for this position?

**\* It is the applicant's responsibility to request these items as early as possible. Deadline exceptions will not be granted for these items even though they require action by someone other than the applicant.**

**⊥ An onsite interview is required. If you are planning to be in the Maryland/ DC area for interviews, please indicate when you are scheduled to be here and we will try to coordinate interview dates:**

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Signature \_\_\_\_\_ Date \_\_\_\_\_

*By my signature above, I certify that all answers and statements on this application are true and complete to the best of my knowledge.*

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**APPLICATION PROCEDURE:**

Please complete and send your application materials to:  
Mehran Mahdavi, Pharm.D. BCOP  
Residency Coordinator, Suburban Hospital Pharmacy Practice Residency  
Pharmacy Services Department  
8600 Old Georgetown Road  
Bethesda, MD 20814  
301-896-2074  
301-896-7807(f)  
MMahdavi2@SuburbanHospital.org

