



Children's Wisconsin

Children's Wisconsin - Milwaukee Campus
Department of Ophthalmology

Orthoptic Fellowship Application

8920 W Connell Court #130
Milwaukee, WI 53226
Phone: (414) 266-2000

Please print or type legibly. Complete all sections.
Attach a separate sheet if more space is needed.

Background

Date _____

Name _____
Last First Middle

Address _____

Email Address _____

Phone Number () _____

Citizenship _____

Have you ever been convicted of a misdemeanor or felony? If yes, do you have any charges pending?

Emergency Contact _____ Relationship _____

Phone Number of Emergency Contact () _____

Address of Emergency Contact _____

Education

List education from high school – present. Applicants must have a bachelor’s degree in order to apply.

Dates Attended	Name of School	Diploma
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Employment History

List employment history from first – most recent

Dates Employed	Company	Location	Position
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References

Three letters of recommendation are required. Please list references below.

1) Name _____ Relationship to Applicant _____
Address _____
Phone/Email _____

2) Name _____ Relationship to Applicant _____
Address _____
Phone/Email _____

3) Name _____ Relationship to Applicant _____
Address _____
Phone/Email _____

Do you have or have had any illness or physical disability that might interfere with your training as an orthoptic student? If yes, please explain.

How did you hear about Orthoptics as a career?

Do you have experience working in an ophthalmology clinic or other eye care facility?

Have you ever worked closely with small children?

What hobbies do you enjoy?

Enclosed with this application:

- Official copy of college transcripts (sent directly to address below if permitted by university)
- Three letters of recommendation (sent directly to address below)
- Personal statement (less than 300 words) of why orthoptics appeals to you. Handwritten, on a separate sheet of paper.

Mail complete application to:

Veronica Picard, CO
Ophthalmology Department
8920 W Connell Court #130
Milwaukee, WI 53226

Any questions regarding the application or program may be answered by emailing vpicard@chw.org

APPLICATION DEADLINE: FEBRUARY 14TH

I certify that all the information I have provided on this application and all other admission application materials is complete, accurate and true to the best of my knowledge.

Applicant's Signature

Date

**Your application is not complete until all supportive documents have been received. Admission decision is made on complete applications only. You will be contacted for an interview if our selection committee approves your application.*

**If you would like to be considered for advanced standing placement you will need to take our qualifying exam the day of your interview, if offered one. You will have up to 3 hours to complete the 100 question multiple choice exam and need an 80% or higher to be considered. Questions regarding advanced placement can be directed to Veronica (vpicard@chw.org).*