



UC Irvine/UC Davis Train New Trainers (TNT) Primary Care Psychiatry (PCP)

Fellowship: **Application for Enrollment**

Please complete the application and send to wcant@uci.edu.

Personal Information

First Name: Suffix: MD DO PA NP

Last Name: Gender:

Race/Ethnicity: Hispanic or Latino White
 American Indian or Alaskan Native African American
 Asian Other
 Native Hawaiian or Other Pacific Islander

Specialty: Internal Medicine Family Medicine Pediatrics Other

Street Address:

City:

State: Zip Code:

Email Address: Phone Number:

1. Name of Institution/Agency/Health System/Sponsor:

2. Post-Residency Training Years in Practice

- PGY 3 (Post-Graduate Year) Post-Residency Years (11-15)
- PGY 4 (Post-Graduate Year) Post-Residency Years (16-20)
- PGY 5 (Post-Graduate Year) Post-Residency Years (21-24)
- Post-Residency Years (1-5) Post-Residency Years (25+)
- Post-Residency Years (6-10)
- Other

3. State percent at each practice setting below (*Note: The total value from a-e should add up to 100%*).

a. Outpatient Clinic: b. Hospital: c. Specialty: d. Mental Health: e. Other:

4. Why are you interested in participating in the TNT PCP Fellowship? (150 words max)

5. What do you hope to accomplish after completing the TNT PCP Fellowship? (150 words max)

6. How do you plan to teach your colleagues what you learn in the TNT PCP Fellowship? (150 words max)

7. Rate your interest in learning about each psychiatric disorder:

	Not interested	Slightly interested	Moderately interested	Very interested	Extremely interested
Depression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bipolar Disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Anxiety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Psychosis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance Abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>