

## **Department of Rehabilitation Services**

# Duke Health Acute Care Physical Therapy Residency

Personal Information
Name:
Mailing Address:
Phone Number:
Email:
Academic Background
List your undergraduate and graduate colleges and universities attended. Please provide official or unofficial transcripts from your undergraduate and graduate schools where you obtained your degrees within the submission.
Undergraduate Degree:
Undergraduate School attended:
Graduate Degree:
Graduate School attended:
Work/Volunteer Experience
Please attach a copy of your resume within the submission



### **Department of Rehabilitation Services**

#### **Recommendations**

List three individuals completing letters of recommendation on your behalf. The letters must be provided in your submission packet and must be in pdf format and signed by your recommendation.

Name, title, and place of employment of individual providing recommendation:	
1.	
2.	
3.	
Application Essays Essays should be typed on separate pages and included with your submission	
1. Describe your reasons for choosing to apply for the Acute Care Physical Therapy Residency Indicate any strengths and/or weaknesses that might influence your pursuit of this program Elaborate on at least two clinical experiences (a particularly challenging or interesting case or clinical internship) that you feel will contribute to your ability to succeed in the program Limit your essay to 1000 words.	m. , job,
2. Please write any additional statement you wish to include. This question is optional and intended only to give each candidate full opportunity for self-expression. Limit essay to 50 words.	0
To the best of my knowledge, the information on this application is true and accurate.	
Sign or type your name:  Date:	



#### **Department of Rehabilitation Services**

Email all application information in a zip file to Michael Schmidt at Michael.schmidt@duke.edu

Michael Schmidt, PT, DPT, MHA
Director of Residency and Fellowship Programming
Department of Rehabilitation Services
Duke University Health System

COMPLETED APPLICATION PACKETS MUST BE RECEIVED BY December 1, 2024

For August 1, 2025-July 31, 2026 Residency