



## International Visiting Scholars Program

The International Visiting Scholars Program is designed for select physicians who practice medicine in other countries and have a strong desire to learn about pediatric medicine with the aim of promoting the improvement of pediatric health care in their home countries. In addition, the program seeks to develop and strengthen clinical, educational and research relationships between Texas Children's Hospital and Baylor College of Medicine and international institutions, public and private.

The International Visiting Scholars Program in Pediatrics consists of clinical observation and participation in daily conferences and Grand Rounds.

***Please note: The program is not designed for physicians pursuing residency positions in the U.S.***

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### Application Procedure

Applicants must meet all requirements to be considered. Submitted applications will be reviewed by committee. Completion of application does not guarantee placement.

Please submit application in PDF format via email at [scholars@texaschildrens.org](mailto:scholars@texaschildrens.org)

You will receive an email notifying that your completed application has been received. Incomplete applications will not be considered.

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### Prerequisites

- a) A medical degree or its equivalent.
- b) Fluency in both written and spoken English. Passing scores on the TOEFL test are strongly recommended.
- c) Previous post-graduate training of at least one year or enrolled in a residency or fellowship program in the country of origin.

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### Application Requirements Prior to Acceptance

- a) Proof of professional standing as a physician, researcher or faculty member of an internationally approved medical school or research institution thoroughly investigated and recognized by the program director of the host department.
- b) Copy of curriculum vitae.
- c) Complete answers to the personal statement questions in the Goals and Objectives section outlining your future plans and how an observational experience at Texas Children's Hospital and Baylor College of Medicine could contribute to those plans. Please be sure to also include what you realistically expect to get out of such an experience.
- d) Letter of support from the applicant's Chief or Supervisor.
- e) Specify dates of interest and length of stay should not exceed 1 month (longer periods require approval by Medical Director of Texas Children's International).
- f) Proof of financial responsibility or support
- g) Commitment to meet the health and safety requirements applicable to physicians, researchers or faculty.
- h) Proof of compliance with immunization requirements of Baylor College of Medicine (all documentation must be translated into English)
- i) Mandatory purchase of major medical insurance during time of observation for the duration of the stay (proof of insurance also accepted).

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### International Visiting Scholars Policies

- a) No funding will be provided to visiting scholars by Texas Children's Hospital and Baylor College of Medicine for any reason. All visiting scholars should make arrangements for housing accommodations and meals prior to his/her arrival.
- b) Due to the large number of physicians interested in observing at Texas Children's Hospital, observation is limited to a maximum of one month.

- c) No direct patient contact is allowed at any time during the observation period.
  - d) Visas must be obtained individually. Texas Children's Hospital and Baylor College of Medicine are unable to sponsor visas for visiting scholars.
  - e) All visiting scholars are expected to sign an agreement acknowledging his/her understanding of the above policies. This agreement must be signed prior to the observers start. Visiting Scholars are also required to sign a Confidentiality Agreement.
  - f) Due to an increased interest in observing at Texas Children's Hospital, we are not able to accommodate all applicants.
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### **Application Policies**

- a) All application materials must be submitted at least three months in advance of requested start date. It is recommended that physicians submit materials as far in advance as possible.
  - b) Visiting scholars will be accepted based on availability of space. Please understand that we typically are only able to accommodate one visiting scholar (per service) at a time due to the busy environment of our hospital.
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### **Requirements Upon Program Completion**

- a) Participants will conduct a 10 minutes presentation to debrief on their experience at Texas Children's Hospital.
  - b) Participants will complete the International Visiting Scholar Experience Survey in order to assess the quality and effectiveness of the International Visiting Scholars Program.
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### **Privileges**

- a) Strictly observer status without direct patient contact in accordance with the rules and regulations set forth by the Texas State Board of Medical Examiners.
- b) Visitor identification badge to be issued upon clearance by the International Services.
- c) Proof of participation in International Visiting Scholars Program (No recommendation letters will be provided)

## Application Form

### Personal Data

- Male
- Female

First Name  Middle Name  Maiden Name  Last Name

Date of birth (mm/dd/yy)  City of Birth  Country of Birth

### Current Address

Street  City /Province  Country  Zip Code

Home phone  Alternate Phone  E-mail

### Emergency contact

First name  Maiden Name  Last Name  Relationship

Phone Number  Alternate Phone  E-mail

### Citizenship

- Are you a U.S. citizen?  Yes  No
- Are you already in the U.S. on a Visa?  Yes  No
- If you are not in the U.S., do you have a Visa to enter?  Yes  No

Country of citizenship

Country of Legal Permanent Residence

## Education

### Degrees Received

Degree Received	Field of Study	Date Received	Institution
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Pediatric

#### Standardized Tests

Please enter your TOEFL Score

Other relevant tests

## Work Experience

Place of Employment	Profession/Occupation	Employer Name	Start and End Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Service Selection

How were you referred to Texas Children's Hospital?

What clinical service line or area would you like to observe?

Preferred dates:

## Goals and Objectives

Describe your short-term and long-term professional goals. How do you expect the International Visiting Scholars Program will contribute to your professional development?

Why are you interested in a learning experience at Texas Children's Hospital?

## Required Documents

Please verify you have the following required documents completed before submitting your application. Please submit this application and all supporting documents via e-mail to [scholars@texaschildrens.org](mailto:scholars@texaschildrens.org)

Form Name	Completed by	Complete/Attach
Recommendation Letter	Professor or Employer	<input type="checkbox"/>
Official Transcript	Medical School	<input type="checkbox"/>
Immunization Form	Physician	<input type="checkbox"/>
Resume	Applicant	<input type="checkbox"/>
Insurance Card (if applicable)	Applicant	<input type="checkbox"/>
Passport Identification/ Visa Stamp	Applicant	<input type="checkbox"/>

## Sign and Submit

**Signature**

**Date**

### Authorization and Signature

I certify that the information submitted and mailed in the admission process is my own work and correct. I understand that my admission may be revoked should any information be false.

## Contact

Texas Children's Hospital  
International Operations  
[scholars@texaschildrens.org](mailto:scholars@texaschildrens.org)