



## Applications Invited

The APA Child and Adolescent Psychiatry Fellowship is designed to promote interest among general psychiatry residents in pursuing careers in child and adolescent psychiatry. Fellows will learn about new clinical research, successful treatments for children and adolescents with mental disorders, and many other issues associated with child and adolescent mental health. Fellows also will have opportunities to meet and network with leaders in child and adolescent psychiatry.

Fellowships will be awarded to five residents to attend the 2012 and 2013 APA Annual Meetings expenses paid and to be mentored by senior child and adolescent psychiatrists.

**Eligibility:** The Fellowship is open to PGY-1 through PGY-3 residents. Applicants must be APA members and have approval from their training director or department chair.

**Application requirements:**

- Completed application form (see next page)
- 500-word letter of interest detailing experience, knowledge, and career path
- Letter of support from a residency training director or department chairperson that must address the resident's potential contribution to the field of child and adolescent psychiatry (Only two applications will be accepted from a training program. )
- Curriculum vitae

Direct queries to [kids@psych.org](mailto:kids@psych.org) or 703-907-8639.

Application material may be submitted by mail, fax, or email.

Fax: 703-907-7852

Email: [kids@psych.org](mailto:kids@psych.org)

Arlington, VA 22209

1000 Wilson Blvd, Suite 1825

American Psychiatric Association

Office of Minority & National Affairs

Child/Adolescent Fellowship

**Application Deadline**  
**January 12, 2012**

This program is supported by an unrestricted educational grant from Shire Pharmaceuticals



## APA Child & Adolescent Psychiatry Fellowship Program

### Application Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: cell \_\_\_\_\_ business \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Psychiatry Residency Training Program: \_\_\_\_\_

APA member number: \_\_\_\_\_

Areas of interest in child/adolescent psychiatry (e.g., services research, psychopharmacology, psychodynamics therapy. If you are chosen to be a fellow, we will use these interests, as well as the rest of your application, to identify a mentor.)

Letter of support from

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email \_\_\_\_\_

**Attach a 500-word statement of interest and your CV**

Return by **January 12, 2012**, to:

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Office of Minority and National Affairs  
American Psychiatric Association  
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Arlington, VA 22209  
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