

Instructions:

- 60 days prior the appointment start date, send an email to Mitra Haddad mhaddad@stanfordhealthcare.org so appropriate HealthStream modules can be assigned along with the following information:
 - Postdoc's full legal name (first & last names)
 - Program name
 - Appointment start & end dates
 - Postdoc email address
 - Specify whether new to Stanford or a continuing appointment. If new call Mitra with the Postdoc's SSN.
- Complete the checklist below.
- Prior to **6-1-21** send this form along with the required materials listed below sequentially in one pdf file via a "secure" email to [Mitra Haddad](#). Thank you!

Postdoc's full name (first & last name)	Current program name	Current PGY level
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Appointment start & end dates	New program name	New PGY Level
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ACGME or Non ACGME New postdoc or Continuing postdoc _____
If continuing, SHC Employee #

Checklist/Required Materials by GME

- 1. OPA Approval email from Office of Postdoctoral Affairs
- 2. [Patient Care Form](#) (electronic signatures not acceptable)
- 3. ECFMG Certificate (If applicable)
- 4. Medical School Diploma
- 5. Medical Board of CA License
- 6. Stanford University Occupational Health Clearance Letter. (to be completed by Postdoc & Program)
to learn more visit: http://med.stanford.edu/gme/housestaff/all-topics/postdoc_appts.html
- 7. HealthStream Clearance Transcript (will be obtained by Mitra)
- 8. CV

Stanford Program approvals:

Program Director name	Program Director signature <small>Electronic signatures are not acceptable</small>	Date signed
Program Coordinator's name + phone no.	Program Coordinator's email	Completion date <small>Submission deadline to GME is 6-1-21</small>

Stanford GME approval:

Ann M Dohn	DIO's Signature	Date signed
Stanford Designated Institutional Official name		