

ADDENDUM TO ERAS APPLICATION



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER.
School of Medicine

Name (Printed)

Department

PROFESSIONAL
LIABILITY Have there been or are there currently pending any malpractice claims, suits, settlements or arbitration proceedings involving your professional medical practice? Yes No

NOTARIZED COPY OF ORIGINAL MEDICAL SCHOOL DIPLOMA REQUIRED

PLEASE RETURN COMPLETED APPLICATION TO:

Texas Tech University Health Sciences Center School of Medicine
Director of Residency Training

SIGNATURE OF APPLICANT

DATE

Questions asked by Texas Medical Board:

Full disclosure: The questions below mirror those asked by the Texas Medical Board (TMB) on the Physician-in-Training permit application. It is imperative that you honestly and fully answer all questions, regardless of whether you believe the information requested is relevant. An honest "yes" answer to a question on your application is not definitive as to the Board's assessment of your present moral character and fitness, but a dishonest "no" answer is evidence of a lack of candor and honesty, which the TMB may perceive as definitive on your character and fitness issue. Please be advised that a false response to any of these questions may be grounds for denial of licensure and reported to the appropriate data banks. In addition to the questions below, the Texas Medical Board will specifically ask about diagnosed or treated conditions (mental, physical, or neurological) that have or may impair your behavior, judgment, or ability to function as a physician. Should you match with a TTUHSC GME program, the Institutional GME Office is available to advise and support your completion of the TMB Physician-in-Training application.

If you believe your offense was **sealed or expunged**, TMB will require a copy of the expunction or non-disclosure order if requested.

Please answer the questions 1(a)-(d) below with regard to any action taken by any state, province, territory, U.S. federal jurisdiction, or country.

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