

Epidemiology Elective Program

Academic Endorsement Form



Applicants must upload the completed, signed form into the Epidemiology Elective Program online application portal by the deadline.

This form is to be completed by the applicant's medical/veterinary school student affairs office.

I approve of
participating in the Centers for Disease Control and Prevention's Epidemiology Elective Program.

Your name:

Title:

Phone:

E-mail:

Signature:

Date:

Thank you for your support.

Please direct all questions to: epielective@cdc.gov.



**Centers for Disease
Control and Prevention**
Center for Surveillance, Epidemiology,
and Laboratory Services