



This one (1) year Residency in Forensic Pathology program is equivalent to a one (1) year US fellowship in Forensic Pathology. The Residency in Forensic Pathology will run from July 1, 2025 to June 30, 2026.

It is open only to Citizens or Permanent Residents of Canada. Candidates must also be proficient in both written and spoken English.

At the time of application, applicants must be either enrolled in or have completed a Residency program in Anatomical or General Pathology within Canada or the United States of America. Applicants must be either certified or eligible for certification in Anatomical or General Pathology by the Royal College of Physicians and Surgeons of Canada (RCPSC).

Applicants must have completed residency training in an RCPSC-accredited program in General Pathology or Anatomical pathology by the start date of July 1, 2025. The successful applicant will be appointed at postgraduate year 6 (PGY6) level.

If the successful applicant is an International Medical Graduate (IMG) who graduated from a medical school outside of Canada or the USA, he/she will have to undertake a Return of Service to Ontario.

Proof of qualifications must be provided by all applicants.

The application must consist of

1. Completed Application Form
2. An up-to-date curriculum vitae (with contact information, citizenship, education and medical training, employment history, publications)
3. Personal Statement of Interest in the Program
4. Copy of primary medical degree (with certified translation into English if your primary medical degree is not in English or French)
5. Medical school transcript and/or Internship Year Certificate (with certified translation into English if not in English or French)
6. Copy of the specialty degree in Anatomical or General Pathology
7. If you expect to complete your specialty certification in anatomical pathology or general pathology after the deadline date for the application but before the start date of the fellowship, kindly include a letter from your Program Director, Divisional Head or Department to confirm your expected date of completion.



Forensic Pathology Residency Training Program
Department of Pathology and Laboratory Medicine
Faculty of Medicine, University of Ottawa
APPLICATION FORM

I. PERSONAL DATA

Name: _____

Current Address: _____

Permanent Address: _____

Telephone Number (s) Home: _____ Work: _____ Cell: _____

E-mail: _____

Status: Canadian Citizen: _____ Permanent Resident of Canada: _____

II. OBJECTIVES

Year and date in which you wish to commence training:

III. BACKGROUND

Residency positions in Forensic Pathology are open **only** to those applicants who have completed Anatomical Pathology Residency Programs accredited by the Royal College of Physicians & Surgeons of Canada.

A. Education (please include undergraduate, graduate and postgraduate education; institutions; degrees obtained and dates)		
<u>Degree Obtained</u>	<u>Institution</u>	<u>Date</u>

B. Honours and Awards

C. Specialty Certification

D. Are you licensed to practise medicine in the Province of Ontario?

I currently hold:

General License Number: _____

Educational License Number: _____

If your application is successful, you will be required to apply for a Postgraduate Education Certificate with the College of Physicians & Surgeons of Ontario please visit www.cpso.on.ca for information on eligibility.

Are you eligible to hold a license in Ontario: Yes

No

Have you ever been reprimanded, or had your license suspended or revoked?

Yes

If yes, please explain in an attached sheet

No

Have you ever been named in (and/or had a judgment against you) in a medical malpractice legal suit?

Yes

If so, please explain in an attached sheet

No



IV. REFERENCES

Please provide three Referees (whom you have asked to send sealed letters of reference directly to this office)

1. Name and position:

Professional Address:

Email:

Telephone:

2. Name and position:

Professional Address:

Email:

Telephone:

3. Name and position:

Professional Address:

Email:

Telephone:

I hereby certify that the information given on this form and attachments is true and complete. I understand that I shall be disqualified if information is withheld or false information has been provided and that any appointment already made or in progress will be cancelled and all credit revoked.

Date: _____

Signature _____

Return completed application to:

Forensic Pathology Residency Training Program Laboratory Medicine and Pathology
Faculty of Medicine, University of Ottawa
4155-451 Smyth rd, Ottawa, Ontario, K1H 8M5
Email: palm.office@uottawa.ca

COMPLETE PAGES 1 TO 3 AND RETURN WITH:

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APPLICATION DEADLINE: June 30th, 2024