



NYC Health + Hospitals Simulation Fellowship Program Application

Please return this completed and signed form with your CV / résumé via email to Dana Trottier, Fellowship Director at Dana.Trottier@nychhc.org and TheSimulationCenter@nychhc.org by **November 1st each year.**

Applicant Information

Full Name: _____

(First, Last, Degree/Credentials)

Phone: _____ Email: _____

Facility: _____

Department: _____

Current Job Title: _____

Personal Statement

Please respond to each of the following questions in one sentence.

1. Why are you interested in the NYC Health + Hospitals Simulation Fellowship Program?
2. How do you feel simulation can be used to improve patient safety and the patient experience at your facility?
3. An improvement science or research project is a key component of the fellowship. Please indicate if you are interested in a particular area of healthcare simulation and why it interests you.

Presentation

Please prepare a 5 minute presentation (any format) on the topic of your choice (does not have to be healthcare related) which you will deliver during the Candidate Interview Session. You will be presenting to the Interview Committee composed of Fellowship Faculty and Simulation Center staff. The intention of this exercise is to begin to share each other's education style and receive feedback in a safe environment.

Curriculum Vitae

Please attach your current CV or résumé.

Endorsement by Supervisor

Supervisor support is important to your growth and development as a simulation educator, as well as your department's investment in your education. Please engage with your supervisor around the requirements for successful completion of the fellowship, and have your supervisor sign this application attesting to their support of you as a simulation educator with 0.2FTE of protected time to complete the fellowship program. Following graduation from the fellowship, it is important to continue to hone your newly acquired skills with simulation activities. Your supervisor's ongoing commitment of dedicated simulation time post-graduation is vitally important for you to be able to conduct simulation activities that benefit both your department and your facility.

“I will support _____ with protected time (0.2FTE) to participate in the New York City Health + Hospitals Simulation Fellowship during the July 2025-June 2026 academic year. Following graduation, I will continue to support them with protected time to conduct simulation activities that will benefit our department/facility.”

Supervisor Name: _____ Supervisor Signature: _____