



Sponsoring Department Selection Form

Please select a specialty from the department options listed below and write your selection in the blank along with your printed name. Please make sure to list both departments if you are declaring more than one.

You may change your sponsoring department at any time by completing a new sponsoring department selection form and emailing it to the curriculum office – curriculum@augusta.edu. Curriculum will notify the involved departments of this change.

We urge you to communicate your intention to change specialties with your advisor and the corresponding departments. While you are not required to declare a sponsoring department in the M3 year, you must select one in order to be eligible to participate in the pre-lottery.

Please make your selection from this list:

Anesthesiology	Medicine	Pathology
Emergency Medicine	Neurology	Psychiatry
Family Medicine	Obstetrics/Gynecology	Pediatrics
Dermatology	Ophthalmology	Radiology
Otolaryngology	Neurosurgery	Orthopedics
Surgery	Urology	PM & R

Sponsoring Department _____

Student Name (Please Print) _____

Please return form to CURRICULUM@AUGUSTA.EDU