

NEW PROGRAM (ACGME):

1. Program Name:
2. Anticipated academic year for start of program:
3. Will the program require an ACGME site visit (can be found on ACGME.org, horizontal tab "specialty", right side of page will show Executive Director to contact for answer):
4. ACGME deadlines for submission of materials for the Review Committee review (can be found on ACGME.org, horizontal tab "specialty", right side of page will show dates) **If the program will require a site visit, the deadline for submission of the application will be sooner to have the site visit completed prior to the Review Committee meeting, check with Executive Director as in #3:*
5. Length of Training program:
6. Number of residents/fellows are you requesting:
7. Will the program participate in the National Residency Match Program (NRMP) or some other Match program:
8. Name of proposed Program Director:
9. Provide documents for PD approval per policy:
http://med.umkc.edu/docs/gme/policy_pdfs/Appointment_of_Residency_Program_Directors_and_Associate_Program_Directors.pdf
10. ACGME requirement for Core Faculty (found in program requirements for the specialty):
11. Number of Core Faculty projected who meet requirement:
12. Briefly explain the rationale for Request (include how such a program will benefit current programs and institutions):
13. Briefly explain how this new program could affect current trainees in other programs:
14. Please prepare and attach as a separate document a plan that outlines the financial aspects of the new program at the affiliated institutions (Truman Medical Centers, Saint Luke's Hospital, Children's Mercy Hospital, Center for Behavioral Medicine, VA, or Research Medical Center, or other). This should include written documentation of the affiliates agreement for funding (please contact UMKC Business Affairs for total cost of residents in your projections), including that the affiliates will agree to fund commiserate with annual GME total cost increases). Include the names of all institutions to be used during training and the number of months and Resident/Fellow PGY level spent at each institution per year (include proposed block diagram). Review "ACGME Guide to Construction of Block Diagram" found on the GME Program Policies & Procedures page to assist you.

Department Chair Typed Name:
Signature:

Program Director Typed Name:
Signature:

Date of Submission to DIO:

FAC Approval Date:

GMEC Approval Date: