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Washington, DC 20001  
www.nrmp.org Email: support@nrmp.org  
Toll-Free: (866) 653-NRMP Phone: (202) 400-2233

## New Institution and Program Form

### Institution Information

\*Institution Name: \_\_\_\_\_

\*Institution Address: \_\_\_\_\_  
\_\_\_\_\_

\*Main Institution Phone: \_\_\_\_\_

\*Institution Website URL: \_\_\_\_\_

\*Institution ACGME Code: \_\_\_\_\_

\*DIO Name: \_\_\_\_\_

\*DIO Date of Birth: \_\_\_\_\_

\*DIO Email: \_\_\_\_\_

\*DIO Phone: \_\_\_\_\_

Institutional Administrator Name: \_\_\_\_\_

\*Institutional Administrator Date of Birth: \_\_\_\_\_

Institutional Administrator Email: \_\_\_\_\_

Institutional Administrator Phone: \_\_\_\_\_

### Program Information

\*Specialty: \_\_\_\_\_

\*Program Address: \_\_\_\_\_  
\_\_\_\_\_

\*ACGME Accreditation #: \_\_\_\_\_

\*Quota (number of Positions to be filled in the Match): \_\_\_\_\_

\*Type of position

**Categorical – C:** programs that begin in the PGY-1 year and provide the full training required for specialty board certification.

**Preliminary – P:** one-year programs that begin in the PGY-1 year and provide prerequisite training for advanced programs.

**Advanced – A:** programs that begin in the PGY-2 year after a year of prerequisite training.

**Physician – R:** programs that offer PGY-2 positions that begin in the year of the Match and are reserved for physicians who have had prior graduate medical education.

**Primary – M:** categorical programs in primary care medicine and primary care pediatrics that begin in the PGY-1 year and provide the full training required for specialty board certification.

**Fellowship – F:** training that begins subsequent to completion of a core residency training program.

\*Osteopathic Recognition?    Yes                      No

Osteopathic Recognition is conferred upon ACGME-accredited programs that provide training in Osteopathic Principles and Practices.

If Yes, do you want to create an Osteopathic program track?            Yes                      No

### **Application Service Information**

NRMP is collecting data on the service(s) your program partners with to receive applications. This information will be displayed in the Program Directory.

\*Please check all application services this program is using:

Electronic Residency Application Service® (ERAS®)

ResidencyCAS (Obstetrics and Gynecology)

Central Application

Other – Please Specify:

### ***For the Main Residency Match ONLY***

\*If your program will participate in the Supplemental Offer and Acceptance Program® (SOAP®) in the event it is unfilled, please check all application services this program is using for SOAP:

Electronic Residency Application Service (ERAS)

ResidencyCAS (Obstetrics and Gynecology)

Central Application Service (CAS)

Other – Please Specify:

### **Program Director**

\*Program Director Name: \_\_\_\_\_

\*Program Director Date of Birth: \_\_\_\_\_

\*Program Director Email: \_\_\_\_\_

\*Program Director Phone: \_\_\_\_\_

### **Program Coordinator**

Program Coordinator Name: \_\_\_\_\_

\*Program Coordinator Date of Birth: \_\_\_\_\_

Program Coordinator Email: \_\_\_\_\_

Program Coordinator Phone: \_\_\_\_\_

Program Website URL: \_\_\_\_\_

### **Institution Billing**

\*Billing Address: \_\_\_\_\_

\_\_\_\_\_

\*Billing Contact Name: \_\_\_\_\_

\*Billing Contact Phone: \_\_\_\_\_

\*Billing Contact Email: \_\_\_\_\_

\* Required

**Please email the completed form to [support@nrmp.org](mailto:support@nrmp.org). If you have questions, contact NRMP Support at 202-400-2233.**