



**Henry Ford St. John Hospital
Graduate Medical Education
Applicant Acknowledgment and Attestation**

This acknowledgment must be signed & returned by all GME Applicants prior to Interview.

Acknowledgment: I have received and reviewed the following documents:

- 1) a sample Postgraduate Training Agreement (Agreement of Appointment/Contract),
- 2) [a copy of the benefits available to associates of HFSJH](#),
- 3) a copy of the GME Program [Resident](#) or [Fellow](#) Selection & Eligibility
- 4) a copy of the HFSJH Non-Recording Agreement (below).
- 5) a copy of the [HFSJH Institutional Policies & Benefits Overview](#)
- 6) I understand that the institution has a strict policy that generally only supports the sponsorship of a J-1 visa. If I require an H1-B visa, I will automatically be identified as no longer eligible to join this program.

I understand there may be some changes in the appointment letter or benefits available to Henry Ford associates and that these documents are provided as information/reference only.

By signing this form, I acknowledge receipt of above documents and confirm that I will neither record nor distribute any part of any interview conducted with Henry Ford St. John Hospital on any virtual platform (e.g. Zoom, WebEx, Skype, etc.). This includes screenshots, still photos, audio recording and video recording and applies regardless of whether the state in which I am located at the time of the interview requires only one-party consent.

In addition, I acknowledge I have been advised of the following:

Henry Ford is committed to providing a safe environment for associates, patients and visitors. In alignment with this commitment, Henry Ford is requiring all associates, as well as individuals performing work or providing services in our facilities, to receive the influenza vaccines.

Please complete, sign & return this document PRIOR to your Interview Date.

Program Applied to: _____, I understand this is a _____ year program.
Program Name Program Length

Applicant Name: _____

Applicant Signature: _____
(Digital signatures accepted)

Date: _____



Non-Recording Agreement for Virtual Interviews:

Our Henry Ford St. John Hospital Residency / Fellowship Program wishes to maintain a fair, equitable, and confidential interview process throughout the recruitment season. Therefore, we will neither record nor distribute any part of the interview conducted with you on a virtual platform (e.g., Zoom, WebEx, Skype, etc.). This includes screenshots, still photos, audio recording, and video recording, and applies regardless of whether the state in which our institution is located requires only one-party consent.

Likewise, the candidate agrees to the same restrictions in order to preserve the integrity of the interview process.

As an applicant, I will neither record nor distribute any part of any interview conducted with Henry Ford St. John Hospital on a virtual platform, (e.g., Zoom, WebEx, Skype, etc.). This includes screenshots, still photos, audio recording, and video recording, and applies regardless of whether the state in which our institution is located requires only one-party consent.

By signing and dating where indicated on the Applicant Attestation Form (above), you are confirming that you have read the preceding information, understand the information, and agree to all the terms.