	* ***	troop beging the	THE STATE OF HEN			_
FORM I MEDICINE	•,	OF STATE EDUC	ATION DEPARTME	51 0	epartment Use On	lv
,			ANTO SENS SESSOR	C 969 \$		
APPLICATION	N FOR LICENSE AN	UD finer nea	ion titus Sentanti	Coder Hiseb	6.6	
ter Conductor	VIVA LICENSE AS	ND LIKST KEC	ISTRATION		₩.a	
df. a. b. D. s.	s of American or Cana	idian Medical Sc	hools Ohll√2 6 5	19 ₹10 %		
or you noin a Sew	York State Medical Li	cense do not coi	nplete this form)			
I FRINT I Y U W	G			- D 17	4 0 1 X	
NIII VIETA		<u> </u>	<u> </u>			
	RGE				0 0 E R	
Y UN	4		I - - - -	5 lo 11	70 LX P	R
10 10 1 d. L 	- f - i - - - - - - - - - - - 					1
2 ADDRESS P	The second secon	the second second second		┑╶╎╙┙┖┙		<u> </u>
				<u> </u>		
				License	Number	
(T.T.)						5701
UN K C C	HECTER				SEP 01	1978
(sign) 1 0 A.	ROG			7		
	Y (() ()			QUALS.	-py . 1/31/78	,
ALTO DATE IN	1/ E K K K		ZIP CODE	F i	ED	1
3 BIRTH	J. TELEPHON		Zii CCAA		A STATE OF THE STA	
DAII our day	At hor		Imiler	At work area co	de number	
SUMPROF PER		li y	ou were not born in the	be United States your	ensure mentional exercise services	320 h j
alin Lisates to	7 H A18 309 90	Ca+ 44 45	- 2/1/24	e manite de la las definide	tizenship most be submitted at by certified mail.	thy mass.
NOTE: Have you ever ap	plied for a New York S	itate Medical Lic	ense? li "yes" give	date		
6. Professional schoolist:						
Notif tion		LOCATIO)N	COMPLETION DA	16 OLE DEL DELCO	*
GICERGE LUSHIA	1974 CLAND 1	ASH WEITER	1,00	Twis 197	7 HO	
		,			/	
* Present employer COMAL.	La Lergeric	E Henres	CONTER.	6-1 2019	hone No. 7/8 275	2/2/
is illase you ever been consi	icted of a crime defens	or medemeano	4d r12	Home College &		
9. Are charges now peraning.	against you for a crime	endony or misde	emeanoriz			
2) Have your car been total negligence in any profession	od zvelty i verprafessi om?	ional conduct, p	rofessional misco	nduct or		
Are charges con penting		tessional conduc	1. protession it mu			
** ** **						
• Pitter att werde envierd i von	the search open digits as a com-	Yes, submittee	letter giving a con	uplete éxplanátión	include copies of	
Court ments — eniction Gunar Carrings	part of the state of the state of	or me Copare.	let to be not treated by	Are alsolution "		
APPLICATION FOR HELS	SERVERY - Consection	k the appropriate	r dear i		CITIZENSHIP	1.5
And the property of the sound of the	Secret Sectional House	of Medical Exam	uners .	MOUTH	201. 11	171G
Accordance of Leading	son of National Board.	of Examiners for	Ortogra Cole Bro	Wahs and Surgeon	15	÷ (1)
Contraction of tenterality	t dan ber ji tanggangga	m 1113° take∧ç	k(6)/6434.342.20	rk State. ₍₁₉₆₆ symb	regation, and	
			DESCRIPTION NOTES AND	ick State Liconomia	Examination (EE) v	
	THE RESERVE OF THE PERSON OF T	Adi ala data da asa asa	and the state of	and Carriedit	Examina (mark exit)	
of supplied to a surrough as	erri fan Tyres Gerak States Historia fan S	zva examan dion ple,	isis indicate.		CARDON RESTORES	
diamphore, taranseepa ateriation and energy differences and appropria	ent to type and states et als ted to type et als ted to type	exanso dion ple, cak	isir indičate. 	Syri	CUS6 9. 4.	
d application armagin of the street of a street OH AII APPRANTS SHO	ent to Syew and States on a field to be see that to be Syew Y MAD READ CARLED	exanso dion ple, cak	isir indičate. 	Syri	CUS6 9. 4.	/l
dishpiras, tarahasiya Siras tarahasi kabasa Marakasa kabasa girasa	ent to Syew and States on a field to be see that to be Syew Y MAD READ CARLED	exanso dion ple, cak	isir indičate. 	Syri	CUS6 9. 4.	/
d application accepts the street of the second of the seco	ent to Syew and States on a field to be see that to be Syew Y MAD READ CARLED	exanso dion ple, cak	isir indičate. 	Syri	CUS6 9. 4.	<i>[</i>
d application armagin of the street of a street OH AII APPRANTS SHO	ent to Syew and States on a field to be see that to be Syew Y MAD READ CARLED	exanso dion ple, cak	isir indičate. 	Syri	CUS6 9. 4.	1
d application and application of the second	ent to Syew and States on a field to be see that to be Syew Y MAD READ CARLED	exanso dion ple, cak	isir indičate. 	Syri	CUS6 9. 4.	//

GRADUATE HOSPITAL TRAINING AND PRACTICE (LIST CHRONOLOGICALLY TO THE PRESENT)

DESCRIPTION	NAME OF INSTITUTION	DATES		
		From	To	LOCATION
B-GYN Lintern	Union of Rochaster	J.17 1917	Jun 1918	Rochester Tork
DB-GYN RESIDENT	Univer of Rockerter Medical Conter	July 199		
				(4)

•	The state of the s	Specially indias	した名が、ような実施を見る。		
	- 10 a. 12A.5.	A CONTRACTOR	Park to the late of the search	The Market of the State of the	
			THE STATE OF STREET	The state of the Book of the state of the	
		4	七万万里。		
	we to write				
			1,400	1. 1000 m 1	
		TOTAL PROTECTS			
	_4A.24	年》均 将8 数:100 /6	The second	CHARLEST CONTRACTOR	
	· 化成二烷烷基键	CONTROL OF STREET	A Land		
*******		Male Same			er i de la companya

		あしてははははない。これは、これは、これには、これには、これには、これには、これには、これには、これ	「光・音楽」では、これには、ことできます。こと	Section of the Company of the Compan	とうしょう みがし みた ほいごうじ だけ こうげんしょ

Index penalties of perjury. I declare and aftern that the statements in whem the foregoing application, including accompanying statements and transcripts are true, complete and correct. I understand that any take or misterating information in or in connection with my application that we cause for denial or loss of licensure.



Disto



Date of Photograph 2007 /9777

PERSONAL SIGNATURES OF THREE LICENSED PHYSICIANS RECOMMENDING APPLICANT

This certifies that I have been PERSONALLY acquainted with the applicant since the year indicated opposite my name, that I BELIEVE OF MY OWN KNOWLEDGE THAT HE/SHE IS OF GOOD MORAL CHARACTER AND I KNOW OF NOTHING WHICH WOULD MILITATE AGAINST HIS/HER LICENSURE IN NEW YORK STATE, that the use of my signature signifies my willingness to submit a letter of recommendation if requested and that ANY RESERVATIONS I might have about the applicant I agree to send by registered mail in a confidential letter to the Department.

	A CONTRACTOR OF THE CONTRACTOR		
Personal Signature	Post Office Add (including street, city,	Iress State in Which ZIP code) Licensed	Have Known
(Ston Mars 6	STENNA MEMORIAL	L HOSPITAL	Applicant Since
The country of	NUCULTYROCHESTER	Y	JUNE 1911
Jestathanlyisten	Stiong memer Electricates,	1.1. M.Y.	June 1977
Side C.C.	Home "	The state of the s	. June , 19.27
	liant New Yest 12220 Street	or money order payable to the N Professional Licensing Services, Sta	
 Applicants for licer \$140 (\$100 for init 	nsure on the basis of taking any pa ial examination and licensure and \$	nt of the New York State licensing 40 for the Initial biennial registration	1)
2. Applicants for licer of-state medical lice	isure on the basis of examinations onse must submit \$100 (\$60 for init	taken outside New York State or by ial licensure and \$40 for the initial b	endorsement of an out-
3. REFUND — Request vides that applican ceeding 50 percent license, in which ca	t for refund must be made within its for professional licenses not reco of the statutory fee paid to the Di see such applicants may not receive fork State licensure at a later date.	2 years of payment. Section 110 of siving such licenses may be granted epartment unless they have failed the of a refund. If you receive a partial re- you will be required to say the full.	the Education Law pro- l partial refunds not ex- ne examination for such
		Down the property of the property of the second second the second	
•			
	CERTIFICATION BY N	MEDICAL SCHOOL	
	(Items (1) and (2) mu	st be completed)	
It is hereby certified that the	applicant named herein:		
(1) Satistactorily comple	eted, prior to matriculation in profes	sional school, all of the required pro	
University of	Vachington	and the required pro	professional education,
	(Preprutessional	sembolita (1865) (1814) Transport (1886) (1886) (1816) Transport (1886) (1886) (1886) (1886) Transport (1886) (1886) (1886)	dilifiki Har (1775) pa Schamppan po (Liftfra) (arvig, 2016)
Q: Was graduated from	this professional school after the	completion of not less than 32, m	Onths with the degree
	of N.D.	5/27/77	Continue of the con-
		Contract the man which man	
Names The State of		के राजी बाजामुन मानेपार ।	रवतिवारियम्भाग्यसम् वाकृतः ।
Million Control of the Control of th	5-16 lensky		
			o kuju umii kunom ee c
Ometal company Assistant	to the Registrar	The state of the s	that the parties,
Medical Sugar The George	Washington University		
	And the control of the contro	(COLLEGE SEAL)	
Date: 7/17/78			
	Certification is not acceptable only	ess dated after graduation.	