BJC HealthCare

David A. Gee Administrative Fellowship at Barnes-Jewish Hospital

APPLICANT INFORMATION		
1. Name:		
Last	First	Middle
2. Address:		
	Number, Street Name	<u> </u>
	,	
Suite/Apt Number		City, State, Zip Code
3. Contact Information:		
	Number: Email: sile: School/Work: k: Personal:	
4. Gender:	5. Race/Ethnicity:	6. What methods did you use to learn of fellowship opportunities? (select all that apply)
Female Male Other I Prefer Not to Answer	American Indian or Alaskan Native Asian Black or African American Hispanic/Latino White Two or More Ethnicities I Prefer Not to Answer	ACHE Post Graduate Fellowship Listing Hospital/Health System Career Page(s) LinkedIn In-Person Recruitment Events Word of Mouth Information Sessions NAHSE Virtual Recruitment Indeed Listserv from Graduate Program Directors
7. Are you a citizen of the United States? YES NO 8. If no, are you authorized to work in the U.S.? YES NO		
Note: Barnes-Jewish Hospital Adminis	trative Fellowship Program is unable to sponsor visas.	
	EDUCATION	N
9. Graduate School(s):		
Degree(s):		
Date Completed/Expected (Month, Year):		
Graduate School Cumulative GPA:		

APPLICATION MATERIAL CHECKLIST

The 2026-2028 David A. Gee Barnes-Jewish Hospital Administrative Fellowship Application should be submitted to bjhadminfellowship@bjc.org via PDF by **September 3, 2025 at 11:59 pm CST**. To be considered for selection, the application materials (listed below) must be submitted in the correct order, and must be emailed as one single PDF file, before/on the deadline. Applications that do not adhere to these guidelines, may not be considered.

- 1. Completed Administrative Fellowship Application Form (this form including the short answer question)
- 2. Cover Letter
 - a. Addressed to BJH Administrative Fellowship Advisory Committee
 - b. Addressing fellowship goals, career objectives, and how you would contribute to the advancement of the organization

3. Current Resume 4. Personal Statement (1-2 pages) that addresses the following: a. Interest in the Administrative Fellowship at Barnes-Jewish Hospital b. Decision to pursue a career in healthcare administration c. Challenge(s) facing academic medical centers 5. Three (3) Letters of References a. Applicant's program director/graduate professor b. Past or present employer or supervisor c. Reference of applicant's choosing (preferably academic or professional) 6. Official Graduate School Transcript **SHORT ANSWER QUESTION** 10. Please answer ONE of the following short answer questions, based on Barnes-Jewish Hospital's KREST values, in 2-3 sentences. Kindness: How do you integrate kindness and empathy into your work? Respect: Why does healthcare need a culture of respect? Excellence: Why is it important for healthcare leaders to adapt to change? Safety: What does safety in the workplace look like to you? Teamwork: How do you strengthen partnerships with your colleagues during challenging times? Barnes-Jewish Hospital's KREST values *Please provide your response to ONE of the questions regarding the Barnes-Jewish Hospital's KREST values provided in the instructions. DISCLAIMER AND SIGNATURE I certify that my answers are true and complete to the best of my knowledge; I also certify by signing below that if this application leads to employment with Barnes-Jewish Hospital, I understand that false or misleading information in my application or interview may result in my immediate dismissal from the interview process or termination from employment. **Date Signed** Signature of Applicant