The Department of Radiation Oncology at Thomas Jefferson University & Hospitals in Philadelphia, Pennsylvania, offers the annual Simon Kramer Society Externship in Radiation Oncology. This externship was established to expose medical students to the discipline of radiation oncology and provides up to two students each year with the opportunity to spend six weeks in our Department working on a research project and participating in clinical and educational activities. You must be a first or second-year student in good standing in an accredited United States Medical School to be considered for this externship. The start and end dates will be determined with the students after the selection process but must occur between June and August.

We are able to provide each extern with a $750 stipend which will be paid within two weeks of their arrival at Jefferson. We are not able to offer any assistance with travel, housing, meals, or other expenses. There may be an opportunity for accommodation on the Jefferson campus during the externship (which we can help you explore), but this is also at the student’s expense.

When applying, students should indicate whether they wish to pursue a research project in medical physics, molecular radiation biology, or clinical radiation oncology.

Students should complete the attached application and return it along with a copy of their CV to Phyllis E. Lewis on or before February 11, 2022, at: phyllis.lewis@jefferson.edu

You should also contact Ms. Lewis at #215-955-5669 with any questions you may have concerning the externship.
NAME: ____________________________________________
E-MAIL ADDRESS: __________________________________
CELL PHONE: ______________________________________
ADDRESS: __________________________________________

MEDICAL SCHOOL: ______________________________________
ADDRESS: ____________________________________________

I AM A: ______First Year Student   _____Second Year Student

EXPECTED GRADUATION DATE: __________________________

Please provide the names, e-mail addresses and phone numbers of (a) a Radiation Oncologist you have worked with and (b) a Faculty member from your medical school whom we can contact for references. If you have not yet worked with a Radiation Oncologist, please supply contact information for two Faculty Members.

Radiation Oncologist: ____________________________________
E-mail Address: ________________________________________
Phone: ________________________________________________

Faculty Member: _______________________________________
E-mail Address: ________________________________________
Phone: ________________________________________________
What type of research project would you like to do?

_________  Clinical Radiation Oncology
_________  Medical Physics
_________  Molecular Radiation Biology

Please explain, in 200 words or less, why you would like to participate in this externship in Radiation Oncology. If you have a specific project in mind that you would like to develop, please also explain your proposed project in 200 words or less.