

Chinese American Medical Society

2012

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41 Elizabeth St, #600, New York, NY 10013 Tel. (212) 334-4760 Fax (646) 304-6373 E-mail: jlove@camsociety.org Web: www.camsociety.org Dear CAMS Members and My Fellow Colleagues,

Caring for our shared Asian community patients has always been our priority here at CAMS/CAIPA. Our students are our future generation of physicians that will carry on providing the special health needs for our Asian population.

I would like to reach out to you to see if you would like to volunteer to be a mentor for a CAMS medical student. If **YES** please return the bottom portion of this letter indicating what areas you would be interested in providing mentorship for medical students:

- 1) Inpatient Hospital Medicine
- 2) Outpatient Office Medicine
- 3) Research Projects

Please feel free to contact me at <u>ylee@maimonidesmed.org</u> if you have any questions.

Sincerely Yours,

Signature

Yick Moon Lee MD FAAP CAMS Board of Director Mentorship Committee Chair

LAST NAME:	FIRST NAME:	
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HOSP. AFFLIATION:SPECIALTY:I would be interested in mentoring medical students in the following area(s): □ Inpatient Hospital Medicine □ Outpatient Office Medicine □ Research Projects Comments:		

Date