**Saint Francis Hospital and Medical Center**Pharmacy Residency Applicant Questionnaire

**Name**:

1. Why did you choose to become a pharmacist?
2. Why would you like to pursue residency training?
3. Why would you like to pursue residency training at Saint Francis?
4. What are your current practice interests?
5. What do you believe are your top two strengths?
6. How do you believe these strengths will help you succeed as a pharmacy resident?
7. What do you believe are your top two non-clinical areas for self-improvement?
8. What role do you envision preceptors playing in your development?
9. What are your short-term goals (<5 years)?
10. What are your long term goals (5-10 years)?