

Event	UHN Observerships
Contact	observerships@uhn.ca
Date	January 1, 2017 to March 31, 2018

**Registrant Information**

First Name	Arushri
Last Name	Swarup
Role	Masters Student
Company	University of Toronto
Address	58 Northforest Trail
City	Kitchener
Province/State	ON
Country	CAN
Postal Code/Zip	N2N 2Z1
Phone	5195755468
E-mail Address	arushri.swarup@mail.utoronto.ca

	Check if currently enrolled as a Student in one of our affiliated educational institutions (proof will be required)
Start Date	06/13/2017
End Date	06/27/2017
Site	TGH
Department/Division	Department of Otolaryngology, Head & Neck Surgery
1.	To learn about endoscopic ear surgery
Consent	No

**SPONSOR - 1**

First Name	David
Last Name	Pothier

Phone	4163405185
Role	Staff Neurotologist
Department/Division	Department of Otolaryngology, Head & Neck Surgery
Date and Time of Entry	31-05-2017 10:52 AM
Comments	

**Confirmation Information**

Confirmation Number	198410709359
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