

# VISITING MEDICAL STUDENT AUDITION ROTATION REQUEST FORM

#### **Contact Information**

Student Name:				
School Email Address:				
Phone Number:		Gender:		

### Medical School Information

Medical School Name:					
Coordinator's Name:					
Coordinator's Email:		Phone #:			
Will you be a 3rd or 4th year student at the time of rotation?					

#### **Desired Rotation**

Will this be an audition or elective rotation (choose one)?:					
Comlex Score: Will you need housing?					
1st Choice Rotation (select from drop-down menu):					
2nd Choice Rotation (select from drop-down menu):					

## **Rotation Dates (Monday - Sunday)**

1ST CHOICE	Start Date:	End Date:	
2ND CHOICE	Start Date:	End Date:	
3RD CHOICE	Start Date:	End Date:	

<u>RESIDENCY PROGRAMS</u>: The following programs offer auditions from scheduled July - December: Emergency Medicine, Family Medicine, General Surgery, Neurology, Ophthalmology, Orthopedics, Otolaryngology, Podiatry. <u>PLEASE BE ADVISED</u>: Internal Medicine and Obstetrics and Gynecology offer auditions from July - January. Urology offers auditions from July - Early October.

# EMAIL COMPLETED FORM to <a href="mailto:sjmostudentrotation@ascension.org">sjmostudentrotation@ascension.org</a>