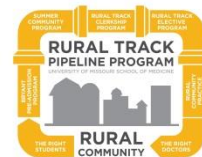




Rural Track Clerkship Program Application AY 2018-2019



Application Instructions:

1. Complete all pages of the application and
2. Submit your completed application *and* current CV, if applicable, **by January 12th at 5 pm (central time)** to Jessica Schuster at schusterjm@health.missouri.edu.

Participation Policy:

A student's completed application for the Rural Track Clerkship Program serves as their commitment to participate. After submission, requests to withdraw are only granted for compelling personal or health reasons. Students should make the request to withdraw in writing, or by email, to the Associate Dean for Student Programs and Professional Development, who may consult with the Rural Track Management Group (RTMG). Students who wish to appeal the Associate Dean's decision may do so by submitting their request in writing to the RTMG.

Selection and Prioritization Criteria:

The selection committee will use the following criteria to determine which students are best suited for the Rural Track Clerkship Program and to prioritize students for Rural Track site placement:

- | | |
|--------------------------------------|--|
| 1. Academic Record | 7. Prior involvement in rural track opportunities |
| 2. Professional Behavior | (e.g. Rural Summer Community Program, ACES) |
| 3. Rural Scholar | 8. Reasons for requesting rural track rotations as |
| 4. Hometown/Rural Background | communicated on the application |
| 5. PRIMO Scholar | 9. Student flexibility in placement site |
| 6. Request for 3 clerkship rotations | 10. Community Integration Program (CIP) Interest |

Questions:

If you have any questions about the application process, please email or call Jana Porter at porterjl@health.missouri.edu or 573-884-1716.

Student Notification:

Students will be notified about their rural track application and site placements in February via email.

Housing:

Co-ed student housing is provided at all training sites at no charge due to the generous support of the local health systems and the Missouri Area Health Education Centers. The housing is furnished. Students are responsible for reasonable household necessities while living in the student housing.

Logistics:

Students may travel to surrounding communities to complete various rotations. Commuting times will be kept to a maximum of 30 minutes.

Rural Track Clerkship Program Application

AY 2018-2019

Name (first middle last):				Maiden:	
Student #:			Date of Birth (MM/DD/YYYY):		
Gender:	Male:	Female:	Age:		
Demographics					
Race/Ethnicity (check all that apply)	<input type="checkbox"/> American Indian/ Alaskan Native	<input type="checkbox"/> Asian	<input type="checkbox"/> Black/African American	<input type="checkbox"/> Hawaiian/Other Pacific Islander	
	<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> White/ Caucasian	Other:		
I am the first in my family to go to college			Yes:	No:	
I grew up with English as my second language			Yes:	No:	
Veteran Status (check one):					
<input type="checkbox"/> Active Duty	<input type="checkbox"/> Veteran Prior Service	<input type="checkbox"/> Not a Veteran			
<input type="checkbox"/> Reservist	<input type="checkbox"/> Veteran Retired				
Loan Repayment Program Recipient (check all that apply):					
<input type="checkbox"/> National Health Service Corps (NHSC)					
<input type="checkbox"/> Primary Care Resource Initiative for Missouri (PRIMO)					
If a PRIMO loan recipient, list the last year you received it:					
ACES (AHEC Career Enhancement Scholars) Participant:			Yes:	No:	
Contact Information					
MU email address:			Alternate email:		
Cell phone #:			Local phone # (if applicable):		
Hometown/permanent address: (not local)	Street Address:			County:	
	City:		State:	Zip:	
Emergency Contact Information					
Emergency Contact:			Phone #:		
Relationship to you:					
Education					
Anticipated Med School Graduation year:					
Name of High School Attended:	Street Address:			County:	
	City:		State:	Zip:	
Name of Undergraduate Attended:	Street Address:			County:	
	City:		State:	Zip:	
Please list any Rural Track Sites (see page 3) where you wouldn't need AHEC housing due to family or friends in the area.					

PREFERENCES:

When completing this section of the application, please refer to the clerkship/elective availability chart.

1. Are you completing your third year in Springfield?

Yes

No

If yes, please indicate any special scheduling requirements.

2. Please indicate the number of clerkships you wish to complete on Rural Track.

2 Clerkships

3 Clerkships

3 Clerkships plus partial (~4 week) surgery rotation

3. Are there any blocks you wish to avoid for rural track rotations? If yes, please list the block(s) and explain.

4. Which of your Rural Track preferences is most important to you:

Clerkship rotations or

Clerkship site

Explain:

5. Rank the Rural Track Sites from 1 to 9 with 1 being your first choice. (Rank all sites.)

Hannibal

Joplin

Lebanon

Osage Beach

Rolla

St. Joseph

Sedalia

Sikeston

West Plains

6. Rank the clerkship rotations from 1 to 7 with 1 being your first choice. (Rank all clerkships.)

Child Health

Family Medicine

Internal Medicine

Neurology

Obstetrics/Gynecology

Psychiatry

Surgery

7. If you are assigned a psychiatry rotation, would you like to complete a 2 week rural track elective during weeks 1 & 2 of the block?

Yes

No

If yes, what 2 week rural track elective are you interested in completing?

8. If you are assigned a neurology rotation, would like to complete a 4 week rural track elective during weeks 1-4 of the block?

Yes

No

If yes, what 4 week rural track elective are you interested in completing?

9. Are there any clerkships you wish to avoid completing on Rural Track? If yes, please explain.

10. List any additional information or circumstances reviewers should be aware of regarding your application for Rural Track.

APPLICATION QUESTIONS:

For each of the following (5) questions, please respond in the space provided.

1. What are your reasons for applying for the rural track experience? (e.g. What do you hope to gain personally and professionally from your rural track experience?)

2. What do you plan to contribute to the community in which you are assigned? Describe any ideas that you have for a community integration project. See the [website](#) for more information about the Community Integration Program (CIP).

3. Are you currently planning to practice in a rural community after your residency or fellowship training? If so, why? If not, why not?

4. If applicable, what are your reasons for wanting to complete surgery on Rural Track?

5. If you didn't participate in the Summer Community Program after your M1 year, please share your reason(s) below.

BIOSKETCH:

You may substitute with your Curriculum Vita, but it should not exceed two pages in length and it must include the same elements, if applicable.

NAME:		DATE:
I. PERSONAL INFORMATION		
Hometown:		
Birth Date:		
High School:		
II. EDUCATION <i>(Begin with baccalaureate degree and continue chronologically. Please list inclusive years)</i>		
Years	Institution	Degree
III. EMPLOYMENT <i>(Begin with postgraduate training positions. Use chronological order and list inclusive years)</i>		
Years	Institution	Employers
IV. VOLUNTEER EXPERIENCE		
V. HONORS AND AWARDS		
VI. MEMBERSHIP IN PROFESSIONAL SOCIETIES		
VII. LICENSURE (if applicable)		