



FAMILY MEDICINE CLERKSHIP APPLICATION

Four week rotations August through February
Four students per rotation
(2) Internal Medicine (2) Family Medicine

Basic Criteria for Consideration:

- 1) Students must be currently enrolled and in good standing in a LCGME approved medical school.
- 2) Must be 4th year medical student at the time of clerkship.
- 3) USMLE I score of 220 or higher. COMLEX score of 450 or higher.
- 4) Must be planning to specialize in Family Medicine.
- 5) With application, students must provide
 - Letter of good standing and signed Program Affiliation Agreement.
 - Proof of liability coverage from their sponsoring school/institution.
 - Immunization records.
 - Current CV
 - Background check form **(do not date this form). We cannot schedule your rotation without all of the above items.**
 - 29 days prior to rotation: 10-panel Drug Screen, 2- Step TB or Quantiferon blood test (as instructed)

August 28 - September 24	November 20 – December 17
September 25 – October 22	December 18 – January 14
October 23 - November 19	January 15 – February 11

Applicant Name (last, first, full middle):

Date of Birth:	Last four of Social Security #:
-----------------------	--

Mailing Address:

Cell Phone:	Telephone (other):
--------------------	---------------------------

Email Address:

Medical School, City & State:

Date of Medical School Graduation:

Have you taken Boards Part I: Yes No **(Please provide copy of test result)**
If yes, score:

Preferred Starting Date for Clerkship (rank up to three choices):

1st	2nd	3rd
------------	------------	------------

Please rank your preference for Clerkship Options:

	Internal Medicine (inpatient experience with residents and faculty)
	Family Medicine (outpatient experience in rural and/or underserved clinic)

Do you intend to or have you applied to our program through ERAS: Yes No Undecided

Return Application and Required Documentation to:
Alisa Mello (alisa.mello@tenethealth.com)
1441 Florida Avenue, Modesto, CA 95350
1400 Florida Avenue, Suite #200, Modesto, Ca 95350 (mailing)
P: 209.576.3519 F: 209.576.3597