Providence Family Medicine Residency Spokane

Sub- I Application

## Shalea Mosley, Administrative Assistant

Family Medicine Residency – Spokane

509-626-9948

Shalea.mosley@providence.org

Application for Clerkship (Senior Elective)

Preferred dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternative dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternative dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Matriculation date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ USMLE/COMLEX 1 P/F: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected graduation date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ USMLE/COMLEX 2 score (if taken): \_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE INCLUDE:**

* **COMPLETED STUDENT APPLICATION PACKET** (Required for students from on affiliated schools only)
* Board Transcripts
* Medical School transcripts
* CV
*  **A SHORT STATEMENT ADDRESSING THE FOLLOWING:** a) Why you would like to do a sub internship in Spokane? b) How did you hear about our program? c) What are your specific goals for rotating here in Spokane?

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Completed application, including LORS, should be submitted directly from your school administrator/ registrar’s office to Shalea Mosley by email: Shalea.mosley@providence.org

We accept sub internship applications February 15th – April 15th for the upcoming academic year. Clerkship status (Approval/denial) and notification to students/ school will be made by April 30th.