BRIDGE Longitudinal Clinical Elective Application

Name:

Phone number:

U number:

1. Are you planning to do any away rotations during 4th year? If so, how many months do you anticipate being away?
2. Why have you chosen to apply for this elective?
3. What skills do you possess that would make you an asset to the BRIDGE Clinic? (do you speak Spanish? Do you have interest in Primary care?)
4. What is your goal in taking this elective, and what is your understanding of what this elective entails?
5. What field of medicine do you plan to go into?