



Please complete the following **Summer Rural/Tribal Externship Application** and attach a one-page **Personal Statement** describing your interest in rural health or tribal health, as well as what you hope to gain from the SRE/STE experience. Submit both documents to SRE Coordinator Michelle Loveless or STE Coordinator Ginger Green.

Name _____ Date _____ CWID _____

Mailing Address _____
Street City State Zip

Phone _____ Alternate Phone _____ Email _____

- Participation in the Summer Rural Externship (SRE) is recommended for StORM Club officers and members and 3 + 1 Program participants and is strongly encouraged for all students considering enrollment in the Rural Medical Track or Global Health Track.
- Participation in the Summer Tribal Externship (STE) is recommended for NASOM officers and members and all students considering enrollment in the Tribal Medical Track.
- Preferences requested are not guaranteed.
- Sites are assigned based on availability and the order in which applications are received.
- All students MUST attend an in-person orientation PRIOR to the first day of their SRE/STE experience.

Please select *either* the SRE or STE and then complete your preferences below:

Summer **Rural** Externship

Summer **Tribal** Externship

Please select your preferred schedule options (1 st preference, 2 nd preference, etc.), orientation date, geographic region preferred & housing needs (Yes/No):						
Experience Dates	1-5	Orientation Dates	X	Regional Preference	1-6	Housing Needed (Y/N)
May 16 - May 27		Friday, May 13 - 1:00 PM		Northeast Oklahoma		
May 30 - June 10		Friday, June 10 – 1:00 PM		Northwest Oklahoma		
June 13- June 24				Northcentral Oklahoma		
June 27 - July 8				Southeast Oklahoma		
July 11 - July 22				Southwest Oklahoma		
				Southcentral Oklahoma		

Site or Physician Suggestion (optional)			
Name:		Fax:	
Address:		Email:	
Phone:		Your Relationship:	

Check all that apply:	
3+1 Student	<input type="checkbox"/> Yes <input type="checkbox"/> No
StORM Officer	<input type="checkbox"/> Yes <input type="checkbox"/> No
StORM Member	<input type="checkbox"/> Yes <input type="checkbox"/> No
NASOM Officer	<input type="checkbox"/> Yes <input type="checkbox"/> No
NASOM Member	<input type="checkbox"/> Yes <input type="checkbox"/> No
Applying for AHEC Scholars	<input type="checkbox"/> Yes <input type="checkbox"/> No
Applying for Global Health Track	<input type="checkbox"/> Yes <input type="checkbox"/> No

Initial	
	I understand I will be required to attend an Orientation prior to my SRE/STE.
	I understand I will receive 2 credit hours (Pass/Fail) after completion.
	I will promptly return all phone calls and emails from the OSU Coordinator.
	I will submit all assignments no later than 7 days after the end of the experience.
	I will dress and conduct myself in a professional manner at all times.
	I will contact my preceptor and OSU Coordinator prior to an absence.

Student's Signature _____