

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

Name		Date		CWID	
Mailing Address					
_	Street	City	State	Zip	
Phone	Alternate Phone		Email		

- Participation in the Summer Rural Externship is recommended for StORM Officers and 3 + 1 Program participants and is strongly encouraged for all students considering enrollment in the Rural Medical Track or Global Health 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 experience.

Please select your preferred schedule options (1st preference, 2nd preference, etc.), orientation date, geographic region preferred & housing needs (Yes/No):

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Experience Dates	<u>1-5</u>	Orientation Dates	X	Regional Preference	<u>1-6</u>	Housing Needed (Y/N)
May 18 - May 29		Friday, May 15 - 1:00 PM		Northeast Oklahoma		
June 1 - June 12		Friday, June 12 – 1:00 PM		Northwest Oklahoma		
June 15- June 26				Northcentral Oklahoma		
June 29 - July 10				Southeast Oklahoma		
July 13 - July 24				Southwest Oklahoma		
				Southcentral Oklahoma		

Site or Physician Sugges	tion (optional)	Check all that apply:
Name:	Fax:	3+1 Student 🗆 Yes 🛛
Address:	Email:	StORM Officer 🗆 Yes
Phone:	Your Relationship:	Applying for AHEC Sch

Initial	
	I understand I will be required to attend an Orientation prior to starting my SRE.
	I understand I will receive 2 credit hours (Pass/Fail graded) 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.

StORM Officer	\Box Yes \Box No
Applying for A	IEC Scholars
	□ Yes □ No
Applying for GI	obal Health
Track.	□ Yes □ No
Track . Planning an Int	
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Student's Signature