

PROCEDURE FOR CLERKSHIP

1. Student should complete Section I of application. Please be sure to indicate whether you would prefer to do your clerkship in Sacramento or Davis.
2. Student's medical school official completes Section II. The application is then returned, along with the student's CV, goals and objectives, and transcripts, to the Sutter Health Family Medicine Residency Program.
3. When approved, the Sutter Health Family Medicine Residency Program Manager will complete Section III and send confirmation to the medical school and applicant.
4. The student should bring their identification badge to wear at all times while on duty during the clerkship.

**APPLICATION FOR CLERKSHIP
SUTTER HEALTH FAMILY MEDICINE RESIDENCY PROGRAM**

Section I: To be completed by medical student

Student's Name		
Address		
Telephone #		Medical School:
Desired Clerkship with Sacramento or Davis Track?		
Email Address:		

I hereby apply for clinical clerkship experience at the Sutter Health Family Medicine Residency Program, Sacramento, California. I would like to begin this 2 week or 4 week (circle one) (1st choice) _____, (2nd choice) _____, or (3rd choice) _____ .

Signature of Medical Student Date

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Section II: Application should be mailed to Pam Kozlowski, Program Manager, Sutter Health Family Medicine Residency, 1201 Alhambra Blvd., Suite 340, Sacramento, California 95816. Telephone: (916) 731-7866

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|---|------------|-----------|
| | Yes | No |
| 1. Personal health coverage is in effect while away from this school | | |
| 2. Malpractice insurance coverage is in effect while away from this school. | | |
| 3. Workers' Compensation coverage is in effect while away from this school | | |
| 4. Is an evaluation report required at the end of the clerkship? | | |

School Address: _____

Signature of School Official Date

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Section III: To be completed by the Sutter Health Family Medicine Residency Program sponsoring this clerkship and returned to the official named in Section II.

_____ 's application has been confirmed and approved for a family medicine clerkship here from _____ to _____. The student should report to _____ at _____ a.m.

Pam Kozlowski, Program Manager Date