

# Pediatric Elective Rotation Application 2026-2027

Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Date of Birth \_\_\_\_\_

Permanent Mailing Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Citizenship/Visa Status \_\_\_\_\_

Premedical/Undergraduate School \_\_\_\_\_

Medical School \_\_\_\_\_ Expected **Month** and **Year** of Graduation \_\_\_\_\_

Medical School Coordinator's Name \_\_\_\_\_

Medical School Coordinator's Email \_\_\_\_\_

**Name of hospital where 3rd year pediatrics clerkship was performed and dates of the clerkship.**

USMLE or COMLEX Part 1 Result \_\_\_\_\_ Part 2 Result (if available) \_\_\_\_\_

Planned Career Specialty (i.e. Pediatrics, Radiology, etc.) \_\_\_\_\_

**Please rank desired pediatric subspecialty elective rotation in order of preference (enter 1, 2, 3, 4, 5, 6, or 7)**

\_\_\_\_ Cardiology      \_\_\_\_ Endocrinology      \_\_\_\_ Gastroenterology      \_\_\_\_ Inpatient Wards

\_\_\_\_ Hematology/Oncology      \_\_\_\_ Neurology      \_\_\_\_ Rheumatology

Please tell us briefly why you want to rotate at Cottage Children's Pediatric Residency Program \_\_\_\_\_

**Provide us with TWO preferred rotation dates from the list of dates below. Mark your desired rotation dates with 1, and your alternate dates with 2. Rotations are four weeks in length and start Monday and end on Friday of the fourth week.**

\_\_\_\_ September 14, 2026 - October 9, 2026

\_\_\_\_ October 12, 2026 - November 6, 2026

\_\_\_\_ November 9, 2026 - December 4, 2026

\_\_\_\_ December 7, 2026 - January 1, 2027

\_\_\_\_ January 4, 2027 - January 29, 2027

Our program welcomes applications from all interested students. However, we prioritize offering these rotations to individuals who are Underrepresented in Medicine (URiM), those with a demonstrated commitment to serving underserved communities, and students who express a strong interest in pursuing residency training at Santa Barbara Cottage Hospital. This approach supports our goal of recruiting residents whose values align with ours, and who reflect the diverse community we serve.

Applicants must have finished three (3) full years of medical school or its equivalent (at least one year of clinical experience) and must be a 4th year student or equivalent during the actual rotation period.

If it is available, will you require housing?  Yes  No

If yes, are you male or female?  Male  Female

If housing is not available, will you still accept this rotation?  Yes  No

Signature \_\_\_\_\_ Date \_\_\_\_\_

*(Type your name when submitting application electronically)*

Email completed application with CV to the GME office at [GMEAdmin@sbch.org](mailto:GMEAdmin@sbch.org)

