COTTAGE CHILDREN'S MEDICAL CENTER

Pediatric **Elective Rotation Application** 2025-2026

Name	Cell Phone
Email Address	Date of Birth
Permanent Mailing Address	
City/State/Zip Code	
Citizenship/Visa Status	
Premedical/Undergraduate School	
Medical School	
Expected Month and Year of Graduation	
Name of hospital where 3rd year Pediatrics clerkship was performed and dates of the clerkship.	
USMLE or COMLEX Part 1 Result	
USMLE or COMLEX Part 2 Result (if available)	
Planned Career Specialty (i.e. Pediatrics, Radiology, etc.)	
Cardiology Endocrinology Hematology/Oncology Neurology Please tell us briefly why you want to rotate at Cottage Children.	
I am interested in the Cottage <i>Diversity in Medicine Visiting</i>	Student Scholarship
Provide us with TWO preferred rotation dates from the list with 1, and your alternate dates with 2. Rotations are four viriday of the fourth week.	•
•	October 13, 2025 - November 7, 2025
November 10, 2025 - December 5, 2025 [January 5, 2026 - January 30, 2026	December 8, 2025 - January 2, 2026
Applicants must have finished three (3) full years of medical s experience) and must be a 4th year student or equivalent du	· · · · · · · · · · · · · · · · · · ·
If it is available, will you require housing? Yes No	mig the detail rotation period.
Signature	Date
(Type your name when submitting application electronically)	
	Catto as

Email completed application to Katherine Mackie, Program Coordinator, at *kdelvall@sbch.org*

