

Add and Drop Clerkship Form

Office of the Registrar

Section A: To be filled by student after consulting/discussing with advisors in Student Affairs or Medical Education. As per policy, please note that any changes to your clinical schedule need to be approved and submitted to the Office of the Registrar at least 30 days before the start of any clerkship and/or elective. Failure to meet this deadline might prevent you from participating in said clerkship or elective. (Last Name) (First Name) Student Name: Student ID: Option # (Circle one) **Drop Clerkship/Elective** Add Official Use **Elective Info** Official Use From Date To Date Enrollment From Date To Date Enrollment Approved Title Code mm/dd/yy mm/dd/yy change Initial Section mm/dd/yy mm/dd/yy change (Initial) Example 7001 OBGYN Clerk 01 8/26/2012 9/27/2013 03 9/30/2012 11/15/2012 03 02 8/26/2012 7001 Primary Care 11/16/2012 12/27/2012 9/27/2013 Reasons for the request: Submitted by Date: Need to meet with Associate Dean for Medical Education Approvals: Associate Dean for Medical Education: Date: Section B: For Official Use Only Date Submitted for verification (OR): Initial: Date Submitted for Approval (ME): Initial: Date Approval Submitted (OR): Initial: For more details read the FAQ on the website?