

## International Medical Student Elective Rotation Request Application Form

Thank you for your interest in applying for an elective rotation at Mary Free Bed Rehabilitation Hospital. To be considered for the first round of offers your completed application packet must be received by **March 27, 2020** for processing. Offers will be made by April 2<sup>nd</sup>. Late submissions will be considered if there is availability in the block dates requested.

Please complete the application form below and return to Bonita Pawloski, Director of Education at [bonita.pawloski@maryfreebed.com](mailto:bonita.pawloski@maryfreebed.com) or fax to 616.840.9626.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Type of Student: \_\_\_\_\_

Home Institution Name: \_\_\_\_\_

Home Institution Address: \_\_\_\_\_

Institution contact name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Rotation (block dates) requests:

1<sup>st</sup> choice: \_\_\_\_\_

2<sup>nd</sup> choice: \_\_\_\_\_

3<sup>rd</sup> choice: \_\_\_\_\_

To complete your application, you will also need to send the following:

- Resume
- Transcript
- Essay describing why you would like to complete a PM&R elective rotation at Mary Free Bed Rehabilitation Hospital.
- Test scores from your institution
- Letter of good standing from your institution

I look forward to reviewing your completed application.

Sincerely,

Bonita M. Pawloski, M.Ed., R.T.(R)(T)(ARRT)  
Director of Education