



OSU Center for Health Sciences
1111 W 17th St
Tulsa, Oklahoma 74107
PHONE: 928-210-3093 FAX: 918-281-2744
ginger.green@okstate.edu

Please complete the following **Summer Rural/Tribal/Urban Summer Externship Application** and attach a one-page **Personal Statement** describing your interest in rural, tribal, or urban health, as well as what you hope to gain from the SRE/STE/SUE experience. Submit both documents to the externship coordinator Ginger Green. **All applications must be received by February 28, 2024.**

Name _____ CWID _____

Phone _____ Email _____ 3+1 Student (circle one): YES/NO

- Participation in the Summer Rural Externship (SRE) is recommended for StORM Club officers and members and 3 + 1 Program participants and is strongly encouraged for all students considering enrollment in the Rural Medical Track or Global Health Track.
- Participation in the Summer Tribal Externship (STE) is recommended for NASOM officers and members and all students considering enrollment in the Tribal Medical Track.
- Participation in the Summer Urban Externship (SUE) is recommended for traditional track students and all students considering enrollment in the Urban Underserved Medical Track.
- Preferences requested are not guaranteed.
- Sites are assigned based on availability and the order in which applications are received.
- All students MUST attend an in-person orientation PRIOR to the first day of their SRE/STE/SUE experience.

Please select either the SRE, STE, OR SUE (only one):

- Summer Rural Externship
- Summer Tribal Externship
- Summer Urban-Underserved Externship (Tulsa/OKC only)

Please rank your preferences for your experience dates below (1-5):

| | |
|------------------------|--|
| May 20- May 31, 2024 | |
| June 3- June 14, 2024 | |
| June 17- June 28, 2024 | |
| July 1- July 12, 2024 | |
| July 15- July 26, 2024 | |

If you are applying for the RURAL or TRIBAL Externship, please complete the additional preferences below (skip if applying for the Urban-Underserved Externship):

| Regional Preference | Rank 1-6 | Housing Needed (Yes/No) |
|--|----------|-------------------------|
| Northeast Oklahoma (Tribal Available) | | |
| Northcentral Oklahoma (Tribal Available) | | |
| Northwest Oklahoma | | |
| Southeast Oklahoma (Tribal Available) | | |
| Southcentral Oklahoma (Tribal Available) | | |
| Southwest Oklahoma | | |

If you have a specific Site or Physician you would like to request your Summer Experience be completed with, please list the contact information below:

| | |
|-------------------|--|
| Name | |
| Address | |
| Phone | |
| Email | |
| Your Relationship | |

**Application continued on next page...*

Please initial all boxes confirming your understanding of the expectations upon your acceptance into the Summer Externship Program. If you need to change your preferences or withdraw your application for any reason, please let us know IMMEDIATELY.

| | Initial Here |
|--|--------------|
| I understand I will be required to attend an in- person Orientation prior to my SRE/STE/SUE. | |
| I understand I will receive 2 credit hours (Pass/Fail) after completion. | |
| I will promptly return all phone calls and emails from OSU staff and my site. | |
| I will submit all assignments no later than 7 days after the end of the experience. | |
| I will dress and conduct myself in a professional manner at all times. | |
| I will contact my preceptor and OSU Regional Administrator prior to any absence. | |

Student Signature: _____

Date _____