**Marian University Clerkship Scheduling Form**

**July 2015 - June 2016**

Please indicate the number of rotation slots you have available for a 3rd year clerkship rotations.

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|  |  |  |  |  |  |  |  |  |  | **2015** |  | **2016** |
| **Service/Specialty** | **Notes** | 7/6to7/31 | 8/3to8/31 | 9/1to9/30 | 10/1to10/30 | 11/2to11/30 | 12/1to12/22 |  | 1/1 to1/29 | 2/1to2/29 | 3/1to3/31 | 4/1to4/29 | 5/2to5/31 | 6/1to6/30 |
| *Ex. Family Medicine* | Unable to take 2 in April & Sept. due to conferences | *2* | *2* | *1* | *2* | *2* | *2* |  | *2* | *2* | *2* | *1* | *2* | *2* |
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Completed by:

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| Name  |  | Date |  | Email |  | Phone |

Please contact MU-COM Clerkship Coordinators with any questions or concerns.

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