The UAB Heersink School of Medicine and the UAB Hospital Graduate Medical Education Office, in collaboration with the UAB Office of Diversity and Inclusion, are providing support for fourth-year medical students to participate in a variety of four-week rotations at our academic medical center.

**Participating Residency Programs**
- Anesthesiology
- Diagnostic Radiology & Interventional Radiology
- Emergency Medicine
- General Surgery
- Neurosurgery
- Obstetrics & Gynecology
- Otolaryngology
- Pediatrics
- Physical Medicine & Rehabilitation
- Plastic Surgery
- Psychiatry
- Urology

**Eligibility**
- Fourth-year medical student in good standing at an accredited U.S. allopathic or osteopathic medical school
- Students must self-identify as under-represented in medicine (URiM)*
- Students must have completed all core clerkships
- Students must have successfully passed USMLE Step 1

**Scholars Receive**
- $1,000 stipend toward travel, food and housing
- Networking opportunities with faculty, residents and students interested in your success

**How to Apply**
Please send the following to Justin Evans, GME Diversity and Inclusion Program Manager, at diversitygme@uabmc.edu:
- Personal statement (500 words max)
- CV
- Application form (below)
- Standard application through VSAS required

Applications must be received by May 29, 2022. The number of students selected for visiting rotations in a clinical specialty will be strictly determined by each department. Participation in a visiting student rotation does not guarantee an invitation for residency program interview. Invitations to interview are provided at the discretion of the individual program.

Questions
Please contact the GME office at diversitygme@uabmc.edu.

* The AAMC defines URiM as “those racial and ethnic populations that are underrepresented in the medical profession relative to their numbers in the general population.”
Visiting Student Rotation Application

Name: ____________________________
Street Address: ____________________
City: ______________________________
State: ___________ Zip: ____________
Email: ____________________________
Medical School: ____________________
Matriculation Date: ________________
Expected Graduation Date: __________
Race/Ethnicity*: □ African-American  
□ Hispanic □ Native American □ Pacific
Islander □ Alaska Native
□ Other: __________________________
*Check all that apply
USMLE Step 1 Score: ________________
USMLE Step 2 CK Score (If applicable):
____________________

I am applying to an away rotation for the following department or program (Please circle one):
■ Anesthesiology
■ Diagnostic Radiology & Interventional Radiology
■ Emergency Medicine
■ General Surgery
■ Neurosurgery
■ Obstetrics & Gynecology
■ Otolaryngology
■ Pediatrics
■ Physical Medicine & Rehabilitation
■ Plastic Surgery
■ Psychiatry
■ Urology