

*Elective in Public Health Application Form*

Submit a completed application form along with the required documents to [healthrp@health.nyc.gov](mailto:healthrp@health.nyc.gov):

- Updated CV/resume
- Letter of support from your medical school or residency program
- If your program or school requires a Program Letter of Agreement (PLA) or Memorandum of Understanding (MOU) - Please let us know at the time of your application.

Date:

Name:

Address:

City/State/Zip code:

Email:

Phone:

**Training Status**

Medical Student      Resident      Fellow      Not currently in training

Name of medical school or residency program:

1<sup>st</sup> Year      2<sup>nd</sup> Year      3<sup>rd</sup> Year      4<sup>th</sup> Year

**Preferred Dates\***

1 <sup>st</sup> choice:	to	2 <sup>nd</sup> choice:	to	3 <sup>rd</sup> choice:	to
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\*We take careful effort to try to accommodate preferred dates indicated; however, we cannot guarantee that your rotation occurs within these preferences. **Elective participants are expected to commit to a full-time rotation for at least four weeks (generally M-F, 9a-5p). Exceptions require prior approval. Arrangements can be made to provide protected time for required clinic responsibilities or lectures at your institution, if necessary.**

Please indicate your rotation preference (in-person, virtual/remote or hybrid):

**Areas of Interest (check all that apply)**

Asthma	HIV/AIDS	School Health
Biostatistics/Epidemiology	Immunization	Sexually Transmitted Diseases
Cancer Prevention	Health Informatics & Electronic Health Records	Substance Abuse
Cardiovascular Health	Injury Violence Prevention	Surveillance
Chronic Disease	Lead Poisoning	Tobacco Control
Community Health	LGBTQ Health	Tuberculosis
Diabetes	Maternal Child Health	Vital Statistics
Emergency Preparedness	Mental Health	Women's/Reproductive Health
Environmental Health	Nutrition/ Obesity	World Trade Center Registry
Health Planning and Policy	Occupational Health/ Worksite Wellness	Other:

### Activities/Skills To Develop (check all that apply)

Biostatistics	Health Education & Promotion Internet	Public Outreach/Education
Chart Review	Research	Public Speaking
Curriculum Training	Literature Review	Qualitative Research
Data Analysis	Medical Writing	Survey Design
Data Entry	Outreach Material Development	Other:
Database Programming	Program Planning and Implementation	
Grant Writing	Program Evaluation	

### Public Health Experience

Please list any relevant public health coursework, especially analytic and/or computer skills.

Please describe in a paragraph or less any previous public health experience(s). Attach addendum, if needed

### Language Skills

Language and proficiency	Read	Write	Speak

### Computer Skills

Program	Basic	Intermediate	Advanced