COLUMBIA UNIVERSITY IRVING MEDICAL CENTER

VAGELOS COLLEGE OF PHYSICIANS & SURGEONS

PETITION TO ADD AN ELECTIVE

<pre>/ am requesting to add a:</pre>	Name:	Today's Date:	
SECTION 1: TYPE OF ELECTIVE I am requesting to add a: Global Health elective (Complete Section 2) Self-arranged preceptorship / research (Complete Sections 2 and 3) *To add an away elective in the US, or an elective that requires prior approval, please review the instructions in UserVoice: https://psofficeofed.uservoice.com/knowledgebase/topics/105393-electives . SECTION 2: ELECTIVE INFORMATION School/Site/Clinic: Faculty/Supervisor Name: Faculty/Supervisor Email: Specialty/Dept: Subspecialty: Section 3: SELF-ARRANGED ELECTIVES Preceptorships: Attach a one-page proposal outlining the objectives, learning format, methods of feedback, and grading criteria. No end-of-rotation summary is required.	UNI:	Elective Month/Dates:	
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Faculty/Supervisor Name:	SECTION 2: ELECTIVE INFORMATION		
 SECTION 3: SELF-ARRANGED ELECTIVES Preceptorships: Attach a one-page proposal outlining the objectives, learning format, methods of feedback, and grading criteria. No end-of-rotation summary is required. 	School/Site/Clinic: Faculty/Supervisor Name: Faculty/Supervisor Email:		
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faculty, hypothesis/purpose, objectives, methods, goals, and role of the student. A two to five page summary is required at the end of the elective.	methods of feedback, a Research Electives : Att faculty, hypothesis/pur	and grading criteria. No end-of-rotation summary is required. Each a two-page max proposal with title, name of the supervising rpose, objectives, methods, goals, and role of the student. A	
SECTION 4: RESEARCH ELECTIVE PROPOSALS ONLY			
I have reviewed the attached research proposal, and approve of the project.		arch proposal, and approve of the project.	
ANIL LALWANI, MD Associate Dean for Student Research			

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I have granted this student permission to enroll in this elective.

Rosa Lee, MD

Senior Associate Dean for Curricular Affairs