

Basic Program Information and Application Guidelines

The MedicIndia M4 Rotation Program is a discovery health rotation specially designed to introduce and involve future doctors and leaders in skill-enhancement, participatory development, and global health. The program is designed to involve urban and rural settings and distinguished and prominent doctors under the banner of medicine and the motive of service.

The MedicIndia M4 Program is a rotation that has been designed to involve fourth-year medical students in their personal and also India's development while at the same time granting academic credit towards a student's elective credit. MedicIndia is looking for dedicated future leaders to develop their medical skills at various rotation locations throughout India. Like the M1 Summer Program, the rotation focuses on providing health care to a growing population, building fellowship, and cultivating future leaders. A minimum of 2 three-week rotation opportunities are available at a:

1. Public Rural Health Center
2. Public Urban Hospital
3. Private Rural Health Center
4. Private Urban Health Center

Please recognize the following requirements:

1. Fourth-year M.D. or D.O. student
2. Attend a US accredited medical school
3. Have a basic understanding in Hindi, Gujarati, and / or Marathi.

The goals of this program are both medically and culturally related. MedicIndia looks to create a transformational experience unique in bringing light to the brilliance of medicine, India, culture, and the self. Students will assist in providing health care to a general, under-served population. In addition, they will demonstrate lessons of service and leadership, assist in providing health-care, work closely with needing patients and doctors, provide preventive medicine outlets to their chosen population, and explore the global disease and illness. The India M4 Health Rotation will promote international health awareness, empower the participants with a sense of social and civic responsibility, help students have a better understanding of pathologies specific to India, and teach cost-effective, skilled bed-side diagnostics. Along with all the medical aspects of this program, there will be an integrated aspect of developing an individual's roots, understanding India and building a higher level of appreciation for his or her country.

Please heed the following guidelines for the MedicIndia application:

1. This form will NOT save and should be PRINTED immediately after completion.
2. Please submit this application at least 45 days before your expected departure.
3. Participants will be notified from both MedicIndia and their partner NGO as soon as possible.
4. If you have additional questions, please contact info@medicindia.

Please send the following to MedicIndia.

MedicIndia Application

Attached resume

Attached copy of medical school transcript. An unofficial copy will suffice.

1 self / peer recommendation and 1 medical school faculty recommendation

One casual photograph - used for pick-up only.

Please contact MedicIndia at info@medicindia.org with questions, enquiries, or support.

Please answer the questions

Questions:

1. Why are you interested in participating in the India Health Rotation? What do you hope to gain from this experience? What do you hope to give from this experience?

2. What do you say to those who would rather see you stay and help an indigent population in this country? Should we be going to India when so much can be done here?

3. Where does this trip fit in with your future plans as a health care provider?

Short Answer question

1. If you were to leave for India tomorrow what one item would you bring and why?

Have you ever been to India? Yes No If so, when?
If so, what was the length and purpose of your visit?

Medical form

Last name First Name Middle Name/Initial

Gender: (circle one) Male Female

Age: Height: Weight:

Physician's Name: Physician Phone Number:

Health Insurance Provider: Health Insurance Number:

Do you have any medical conditions that we should be aware of?

Yes No

Do you have any restrictive conditions?

Yes No

Do you have any respiratory ailments?

Yes No

Do you have any conditions that will require special arrangements or assistance for you to participate in?

Yes No

Do you wear glasses and / or contact lenses?

Yes No

Is there any other medical concern that we should be aware of?

Yes No

I certify that all of the information on the previous pages is true and complete. I have noted all medical conditions and disabilities above. I believe that I am physically and mentally capable of participating in the India Health Rotation.

SIGNATURE:

DATE: