

**Northwestern University Feinberg School of Medicine**  
**McGaw Medical Center of Northwestern University**  
**Visiting Elective Program for Students Underrepresented in Medicine**  
**2024-2025 Academic Year**

**Program Description:**

Northwestern University Feinberg School of Medicine welcomes students from diverse backgrounds from the Class of 2025 to apply for elective rotations. Students will be connected to various networking opportunities during their rotation and will be connected with members of the Northwestern McGaw Underrepresented Residents and Fellows Forum (<https://www.mcgaw.northwestern.edu/benefits-resources/nmurff.html>).

We are providing stipends of up to \$1,000 (for students rotating at NMH and Shirley Ryan) or up to \$2,000 (for students rotating at LCH) to qualified students to help defray the cost of an away rotation. We define the following groups as underrepresented for all programs: Black (African/African American), Latino/Hispanic (Mexican American, Cuban, Puerto Rican, Central American, South American), Native American, Native Hawaiian, Pacific Islander, LGBTQ+, and students from economically disadvantaged backgrounds. Women are defined as underrepresented for: Orthopaedic Surgery, General Surgery, Neurosurgery, Urology, and Plastic Surgery.

**Eligibility Requirements:**

Prospective students for the Visiting Elective Program for Students Underrepresented in Medicine (UiM):

- Must be a U.S. Citizen or Permanent Resident
- Must be pursuing a medical degree at an LCME- or AOA-accredited medical school
- Must be in their final year of medical school
- Must be in good standing at their medical school
- Must have completed all core clerkships in Internal Medicine, Obstetrics/Gynecology, Pediatrics, and Surgery
- Must apply to rotate up to and including Block 20. Block 21 students may be considered pending available funds. Block 22 and all blocks afterwards are not eligible for the stipend.

**Application information:**

Complete the application on the next page. Attach additional pages for the essay questions if necessary.

All required visiting student application materials must be submitted via VSLO in addition to this application. This application must be complete and uploaded to VSLO before you submit your VSLO application. **We are unable to consider supplemental applications received after you are notified of an acceptance to an elective.**

Students applying for the UiM Program are encouraged to apply no less than three months in advance to assure adequate processing time for the supplemental application. Please refer to the Visiting student website for further information: <http://www.feinberg.northwestern.edu/md-education/visiting-students/index.html>.

**Acceptance:**

Acceptance to the Visiting Elective Program for Students Underrepresented in Medicine is contingent upon acceptance to the Visiting Student Program. We begin reviewing the supplemental applications after a rotation offer is made, and students will be emailed their UiM application decision within 3-4 weeks. Additional questions should be directed to [visitingstudents@northwestern.edu](mailto:visitingstudents@northwestern.edu).

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Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Medical School: \_\_\_\_\_ Expected grad. date: \_\_\_\_\_

Birth place: \_\_\_\_\_ Date of birth (mm/dd/yyyy): \_\_\_\_\_

U.S. Citizen                  Permanent Resident                  Country of citizenship: \_\_\_\_\_

What city/state do you call home? \_\_\_\_\_ Gender:    M    F    Prefer to self-describe: \_\_\_\_\_

Specialty interest: \_\_\_\_\_ How did you hear about the program? \_\_\_\_\_

Did you attend any Northwestern-sponsored events at the SNMA Annual meeting? \_\_\_\_\_

Please briefly describe how you meet the criteria for underrepresented in medicine:

Please briefly describe why you want to rotate at Northwestern:

How will your participation in this program enhance your professional interests and further your career goals?

My participation in this program is dependent upon receipt of a stipend:    Yes                  No

Signed: \_\_\_\_\_ Date: \_\_\_\_\_