

OAKLAND UNIVERSITY WILLIAM BEAUMONT

### **International Away Elective Application**

**Name:** \_\_\_\_\_ **Oakland Email:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Expected Grad Date:** \_\_\_\_\_

**Program Requested:**

\_\_\_ Hadassah-Hebrew University (Jerusalem, Israel)

\_\_\_ Emek Medical Center (Afula, Israel)

\_\_\_ UCSD Border Health Elective

\_\_\_ VSLO: \_\_\_\_\_

**Elective Opportunity (program specialty or subspecialty):** \_\_\_\_\_

**Elective dates:** \_\_\_\_\_

**Description of Elective (may be downloaded from VSLO or Host institution):**

**Anticipated Clinical Activities:**

**Learning Objectives:**

Please list 3-5 intended objectives. These objectives should indicate your anticipated learning outcomes and relate back to the OUWB core competencies. These objectives should be developed with your assigned Global Health Director.

