Please fill out this form and return it with the required documents to info@mymedicalelective.org



Booking Form

Tanzania elective programme.

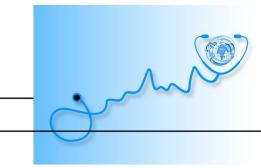


www.mymedicalelective.org

info@mymedicalelective.org

My Medical Elective

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Full name:	Neurology
Date of Birth:	Radiology
Gender:	Other
Contact number:	Would you like to rotate in different departments or would you like to stay in one
Email:	department for the full elective?
Country of residence:	
Are you;	What are the number of weeks you would like to stay for your elective? Weeks are from Monday-Friday and Saturday and Sundays are free from the hospital, where you can
Student	plan additional trips.
Doctor	One week £425
Nurse	 Two weeks £650 Three weeks £875 Four weeks £1100 Five weeks £1325 Six weeks £1550
Pre med student	
Volunteer non medical	
What year of study are you in?	Seven weeks £1775Eight weeks £2000
	• Eight +
What speciality are you interested in? Choose as many as you wish.	What dates are you looking at for your elective?
Surgery	
Obstetrics and Gynae	How many instalments would you like to pay in? Last instalment should be paid one month prior to the commencement of your elective. Please indicate number of payments, amount and date of each payment and we will invoice accordingly.
Orthopaedics	
Emergency Medicine	
Cardiology	

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Internal medicine

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My Medical Elective

Travel insurance

Flight reservation number

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I hereby declare that the information provided in this application is true and correct to Do you have any pre existing medical conditions? the best of my knowledge. I understand that any false information may result in the rejection of my application or termination of my elective placement. Do you take any medication regularly? Do you have any known allergies? Do you have any specific dietary requirements? Name: Are you up to date with immunisations? Please check CDC guidelines on immunisations for Tanzania and consult healthcare practitioner regarding prophylaxis for malaria. Signature: **Required documents** Curriculum Vitae Letter of motivation Date: Student status/ Graduate status (not needed if non medical and just volunteering) Emergency contact details; Name, Relationship, Number, Email

Criminal background check (from the country you reside in)

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