Department of Pathology Clinical Rotation Medicine

Scholarship Application

# Visiting Elective Program Scholarship Application

Thank you for your interest in the Visiting Elective Program Scholarship with the Department of Pathology and Laboratory Medicine UC Davis! Eligible participants are full-time, fourth-year medical students in good standing at accredited U.S. medical schools.

Students must remain registered at their own schools while participating in the two-week elective at UC Davis. Each student must complete an application form through the American Association of Medical Colleges’ Visiting Student Learning Opportunities (VSLO) Application Service at aamc.org/vslo.

# 2025 - 2026 Application Cycle

The scholarship application cycle opens October 1, 2025. To help you plan accordingly, please note that your VSLO application must be approved no later than 60 days prior to the start of your rotation. Students must have applied and be accepted to the department’s clinical elective in-person program through the AAMC Visiting Student Application Service (VSAS) before the scholarship is awarded. You will be contacted via email.

First Name:

Middle Name:

Last Name:

Previous First Name (if different than current)

Previous Last Name (if different than current)

Primary Phone Number

Email Address

Medical School

Expected Graduation (Month/Year)

**OPTIONAL:** If you already have a National Provider Identifier (NPI) number, please enter it below.

Please list names and dates below for electives to which you have applied (<https://health.ucdavis.edu/pathology/education/medical_school_course/courses.html>):

**Letter of Intent Letter of Intent:** Answer the following questions below to complete your scholarship application. For each question, please limit the word count to 500 - 700 words maximum.

Describe your path to medicine, providing insights into the pivotal moments and experiences that have influenced your decision to pursue medicine.

Describe your interest in supporting our UC Davis/Northern California communities through your actions and involvement. What health challenges have you discovered that affect our community? What kind of healthcare initiatives are you interested in pursuing in the future to address these challenges? Briefly explain your potential to contribute to your chosen elective program.

Discuss your interest in joining UC Davis Health and/or serving Northern California, outlining the reasons behind your choice and how it aligns with your professional goal(s). What contributions will you bring to UC Davis Health and/or Northern California communities?

**OPTIONAL: You may submit any applicable documents to be reviewed as part of your application (resume/CV). Letter of Recommendations are not required.**