

Louisiana State University School of Medicine - New Orleans

Rural Scholar Track Application

If you have questions about the Rural Scholar Track, or wish to submit an application, please contact the Primary Care Programs Coordinator at primarycare@lsuhsc.edu.

RURAL SCHOLAR TRACK (RST):

- A rural medical school curriculum track for those interested in practicing family medicine, general internal medicine, general pediatrics, general medicine-pediatrics, or general obstetrics-gynecology a rural or underserved region of Louisiana after training.
- RST students participate in unique rural primary care curricular and extracurricular experiences.
- Includes a contractual post-training commitment to practice primary care in a rural or underserved region of Louisiana for 15 months for each year that a full medical school tuition exemption is received.
- Must be a Louisiana resident.
- Students in the Rural Scholar Track are not eligible for the Primary Care Scholar Program.
- A signed contract commits the RST awardee to practice in a rural or underserved Louisiana area approved by the RST Advisory Committee in order to fulfill the terms of the post-training practice commitment.
- Rural Scholar Track students are subject to the rules outlined in the RST contract for medical services after graduation from residency. Default on the terms of the RST contract is subject to a financial penalty.
- RST students participate in the Rural Medicine Interest Group.
- Rural Scholar Track students are required to spend all third and fourth year required clerkships and rotations in Lafayette, Louisiana.
- RST students attend one full day per week in a longitudinal experience with a primary care preceptor during the L3 year and a portion of the L4 year, when not on away rotations. Preceptor-days are flexible from week to week depending on individual clerkship schedules.
- RST students also spend one block of their L4 year with a primary care preceptor.
- Rural Scholar Track students maintain contact with the RST Program throughout medical school, residency and the years of practice for which they are obligated to serve out the terms of their RST contract.

PERSONAL INFORMATION

Please complete all required fields.

1) Name:

2) Permanent Address:

Address Line 1:

Address Line 2:

City:

State:

Zip:

3) Home Parish:

4) Current Address:

Address Line 1:

Address Line 2:

City:

State:

Zip:

5) Cell Phone Number : ()

6) Permanent Email Address:

7) List the college(s) and high school that you attended. Please include city, state, and dates attended (ex: 08/2016 – 05/2020)

College:

City:

State:

Degree:

Major:

Dates Attended:

College:

City:

State:

Degree:

Major:

Dates Attended:

High School:

City:

State:

Dates Attended:

8) Please provide specific information about your immediate and extended family that live in rural or underserved communities in Louisiana. (i.e., relationship, community, occupation, etc.)

9) List all extracurricular activities during college and/or medical school, e.g., volunteer work, clubs, etc. Please indicate the duration and nature of your participation.

10) Describe your involvement in your home community prior to and since applying to medical school, e.g., community groups, activities, or volunteer efforts, etc.

11) List your hobbies and interests.

12) What medical specialty possibilities have you considered?

13) Based on your own personal experience, observations, and insights, describe the roles and responsibilities of a rural primary care physician.

14) Why do you feel you are a suitable candidate for the Rural Scholar Track?

III. REFERENCES AND SIGNATURES

15) List two references.

Select individuals who can provide information about your involvement in your home community and your suitability for the Rural Scholar Track Program.

Name:

Position:

Address:

Email & Phone:

Name:

Position:

Address:

Email & Phone:

16) Do you have any commitments or obligations that will interfere with practicing medicine in Louisiana immediately following completion of a residency program (i.e., military, ROTC, religious, etc.?)

YES: NO:

If yes, please describe:

If you are interested in applying to the **Rural Scholar Track** please check the box and sign below:

- I UNDERSTAND*** the requirements and obligations of the **Rural ScholarTrack (RST)**. I understand that if accepted, I will have a contractual commitment to participate in and complete the Rural Scholar Track medical education components summarized above:

Signature:

Date: