Letterhead

University Name:

Student Name:

The student above

* has completed bedside training.
* has completed electives, maintaining good attendance and attitude throughout.
* has studied material and completed electives related to the subjects listed below.

|  |  |  |
| --- | --- | --- |
| MaterialStudied | Elective | Subjects  |
| □ | □ | Anesthesia and Pain Medicine  |
| □ | □ | Cardiovascular Biology and Medicine  |
| □ | □ | Cardiovascular Surgery  |
| □ | □ | Clinical Laboratory Medicine  |
| □ | □ | Clinical Oncology |
| □ | □ | Coloproctological Surgery  |
| □ | □ | Emergency and Disaster Medicine  |
| □ | □ | Esophageal and Gastroenterological Surgery  |
| □ | □ | Gastroenterological Imaging and Interventional Oncology  |
| □ | □ | Gastroenterology  |
| □ | □ | General Medicine  |
| □ | □ | General Thoracic Surgery  |
| □ | □ | Hematology |
| □ | □ | Hepatobiliary Pancreatic Surgery  |
| □ | □ | Human Pathology  |
| □ | □ | Nephrology  |
| □ | □ | Neurology  |
| □ | □ | Neurosurgery  |
| □ | □ | Hematology |
| □ | □ | Obstetrics and Gynecology  |
| □ | □ | Ophthalmology  |
| □ | □ | Otorhinolaryngology  |
| □ | □ | Pediatric General and Urogenital Surgery  |
| □ | □ | Pediatrics and Adolescent Medicine  |
| □ | □ | Plastic and Reconstructive Surgery  |
| □ | □ | Psychiatry and Behavioral Science  |
| □ | □ | Radiation Oncology  |
| □ | □ | Radiology General  |
| □ | □ | Radiology Neuro  |
| □ | □ | Rehabilitation Medicine  |
| □ | □ | Respiratory Medicine  |
| □ | □ | Rheumatology  |
| □ | □ | Urology |

Signature and Stamp

Name of The Person Who Signed this Document

Institution Name

Office Name

Address

Phone Number; Email Address