Thank you for your interest in serving as a preceptor for the RUOP 2020 season. The Area Health Education Center for Western Washington (AHECWW) and the UW School of Medicine work together to support RUOP placements.

Please complete the application questions below and submit by January 25, 2020 for priority consideration.

This application may be completed on-line at: [http://j.mp/2QYyDou](http://j.mp/2QYyDou) or [AHECWW.org](http://AHECWW.org)

### Contact Information:

<table>
<thead>
<tr>
<th>Clinic Name:</th>
<th>Clinic Type:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ Family Medicine ☐ Internal Medicine</td>
</tr>
<tr>
<td></td>
<td>☐ Pediatrics ☐ Ob/Gyn (with Primary Care)</td>
</tr>
</tbody>
</table>

Primary preceptor's name:  

Degree:  
☐ MD  ☐ DO  
(Additional preceptors may be added: See page 2)

Year(s) previously participated in RUOP: (check all that apply)  
☐ Other (specify):  

Preceptor’s e-mail address:  

Preceptor’s direct line/cell phone:  

For updates by text, provide cell phone carrier:  
☐ AT&T  ☐ Verizon  ☐ T-Mobile  ☐ Sprint  
☐ Other (specify):  

Clinic Manager’s Name:  

Clinic Manager’s direct phone number:  

Clinic Manager’s e-mail address:  

Credentialing Contact name (if applicable):  

Credentialing Contact phone number:  

Credentialing Contact e-mail address:  

**Clinic Mailing Address:**  
City, Zip code (in Washington State)  

**Clinic Physical Address (if different):**  
City (in Washington State)  

### Schedule Availability Information:

Preceptor is available for the following dates between July 2 and August 31, 2019:  

Available dates must comprise at least one consecutive 4-week period.

Dates during which the preceptor is not available (if possible, provide the name of physician who can provide coverage as preceptor during absence):
**Housing Availability Information:** Housing assistance makes rural placements possible. Lack of housing limits placements.

<table>
<thead>
<tr>
<th>Housing is available through:</th>
<th>Other:</th>
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<tbody>
<tr>
<td>Preceptor</td>
<td></td>
</tr>
<tr>
<td>Clinic</td>
<td></td>
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<tr>
<td>Hospital</td>
<td></td>
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<tr>
<td>Community member</td>
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<table>
<thead>
<tr>
<th>Name of housing contact:</th>
<th>Relationship to Clinic (if any):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Housing e-mail address:</th>
<th>Housing contact phone number:</th>
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</table>

**Clinic Information:** Please check the boxes below for all that apply:

- □ Clinic provides obstetrical services
- □ Clinic provides pre-natal care
- □ Tribal Health Center
- □ Indian Health Services provider
- □ Community Health Center
- □ Private Practice
- □ Group Practice
- □ Hospital-based clinic
- □ Languages other than English spoken at clinic
  - □ Spanish
  - □ Mandarin
  - □ Russian
  - □ Other (specify): __________ ___________ 
- □ Clinic has capacity to host more than one RUOP student at a time (concurrently or sequentially)
- □ Preceptor has current faculty appointment with UW School of Medicine (Not Required)
- □ Preceptor is a former medical student in the Washington, Wyoming, Alaska, Montana, Idaho region

<table>
<thead>
<tr>
<th>Additional preceptors' name(s) (if applicable):</th>
<th>Degree: □ MD □ DO □ MPH</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>E-mail:</th>
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</thead>
</table>

Please use this space for any additional information or clinic goals for participation in RUOP (optional): __________ ___________ 

**Additional Interests:**

- □ Clinic is interested in information about other preceptorship opportunities in fall, winter or spring for DNP students
- □ Clinic is interested in information about other preceptorship or shadowing opportunities in fall, winter or spring for other health professions students

**AHECWW provides free CME. Tell us what topics you’d be interested in:**

- □ Vaccinations
- □ Cultural Humility
- □ Social Determinants of Health
- □ Palliative Care
- □ Other: __________ ___________ 

Please return the completed application by January 25, 2019 to:

Postal mail: Area Health Education Center for Western Washington (AHECWW)
237 W est Kellogg Road
Bellingham, Washington 98226

E-mail: info@AHECWW.org Fax: (360) 383-4000

Applications received after January 25 will be considered if space is available. Questions? info@AHECWW.org or (360) 383-3170.

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