



### FOURTH YEAR ELECTIVES – LEARNING OBJECTIVES

**This form must be completed for all electives where the preceptor is not affiliated to a Canadian University medical elective program.** This form is to be completed and submitted to the Schulich Undergraduate Education Office **before the start of your elective rotation.** The objectives must also be reviewed and signed off by your elective rotation supervisor **at the start of your elective rotation.** You should keep a copy of this form for your mid-rotation review (rotations of 4 weeks or more) and your final assessment exit interview. Completed, signed form should be attached to the final Elective Assessment form and sent back to the UME office following elective.

**PLEASE PRINT:**

Name of Student: \_\_\_\_\_

Name of Elective Rotation: \_\_\_\_\_

Location: \_\_\_\_\_

Elective Rotation Supervisor: \_\_\_\_\_

Elective Rotation Dates: \_\_\_\_\_

#	Objectives - Details	Comments	Achieved? Yes / No
1	Physician as Medical Expert:		
2	Physician as Communicator/Educator:		
3	Physician as Health Advocate:		
4	Physician as Professional/Collaborator:		
5	Physician as Resource Manager:		
6	Physician as Scholar:		
7	Other Rotation-Specific Objectives:		

**Note:** The student is not required to have objectives identified for all categories. If objectives change after the initial meeting with the elective rotation supervisor, the updated objectives are to be forwarded to the Schulich Undergraduate Education Office.

Questions – Contact Dawn MacDonald, Clinical Electives Coordinator at [dawn.macdonald@schulich.uwo.ca](mailto:dawn.macdonald@schulich.uwo.ca)