Observership Application Check List

• Core application
  o Passport or US photo ID including a student ID card with a photograph.
  o Confidentially Sheet signed by applicant and preceptor
  o Application signed by preceptor with dates of Observership filled out.
  o Letters of recommendation, educational documents, CV etc.....

• Immunizations
  o Evidence of immunity to Measles, Mumps and Rubella (2 doses of MMR)
  o History of Chicken Pox or documentation of the Varicella Vaccine
  o Pre-placement and annual TB test or chest x-ray as appropriate (Proof of Chest X-ray within the past year if history of positive PPD) Example: TB test is Positive >10 percent and the Chest X-ray, the applicant can be approved.
  o Proof of being offered Hepatitis B Vaccine
  o Annual Influenza vaccination is required during October 1 – April 1 or Aurora Health Care’s policy.

• Application Process & Fee of $100. There is a $100 non-refundable application processing and observership coordination fee. The fee can be paid by check or money order payable to Aurora Health Care Medical Education, these are the only two payment methods accepted. Applications can be mailed or emailed. Payment must be mailed in a check form and should be made payable to Aurora Sinai Medical Center.

Payment may be sent to:
Crystal Davis
 Advocate Aurora Health Care
Aurora Sinai Medical Center - Outpatient Health Center - 3rd Fl Office 3083A
1020 N 12th Street
Milwaukee, WI 53233