



PHYSICIAN ASSISTANT STUDIES
PRECEPTOR INTEREST FORM 2025

Name (Print): _____ Cred: _____

Practice: _____

Hospital Affiliation(s) (if applicable): _____

Specialty: _____

Board Certification Name (if applicable): _____

Board Certification Expiration Date (if applicable): _____

PRECEPTORSHIP OPPORTUNITIES

Please select availability below. Rotations 1-7 are six weeks in length, Rotation 8 is a four-week elective.

Rotation #	Dates	# Students per Rotation
1	January 13 – February 19	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> # _____
2	February 24 – April 2	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> # _____
3	April 7 – May 14	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> # _____
4	May 19 – June 25	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> # _____
5	June 30 – August 6	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> # _____
6	August 11 – September 17	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> # _____
7	September 22 – October 29	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> # _____
8 (Elective)	November 3 – November 25	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> # _____

ADDITIONAL OPPORTUNITIES

Please select any additional programmatic opportunities you are interested in below:

☐ Clinical lectures for Didactic education

☐ Serve on the PA Advisory Board (quarterly meetings)

☐ Lead a Problem-Based Learning (PBL) Group

☐ Assist in technical skills instruction/simulations

☐ Clinical Competency Assessments at End of Rotation (EOR) Days

☐ Feb. 20-21 ☐ Apr. 3-4 ☐ May 15-16 ☐ June 26-27 ☐ Aug. 7-8 ☐ Sept. 18-19 ☐ Oct. 30-31

Signature

Date

Thank you for your support of the program!

Please return completed form via email to Courtney Kelly cakelly@noctrl.edu or Tedjitou Martin at tmartin@noctrl.edu, or via fax to 630-637-5749

*****Please provide your up to date CV when returning this document, if not already on file.**