

CLINICAL FACULTY QUESTIONNAIRE

NAME: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP _____

HOME PHONE: _____ CELL: _____
FAX: _____

BUSINESS ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

WORK PHONE: _____ FAX: _____

E-MAIL ADDRESS: _____

(Circle those below that you are interested in)

I. OFFICE-BASED TEACHING OPPORTUNITIES:

Medical Students

1. Foundations of Doctoring
2. Clinical Clerkship in Infant, Child, and Adolescent Care
3. Warren Village

Residents

1. Rural Rotation

Child Health Associate/Physician Assistant Program

1. First-and Second-Year Clinical Rotations
2. Second-Year Summer Clinical Rotations
3. Third-Year Rural Clinical Rotations
4. Third-Year Clinical Rotations

II. CLASSROOM-BASED TEACHING OPPORTUNITIES

Medical Students

1. Foundations of Doctoring Curriculum

Child Health Associate/Physician Assistant Program

1. Physical Diagnosis Curriculum
2. Problem Based Clinical Curriculum

3. Clinical Cornerstones Curriculum
4. Interprofessional Education and Development Curriculum
5. Additional Guest Lecturer Opportunities

III. CLINICAL FACULTY AFFAIRS COMMITTEE

IV. OTHER COMMITTEES WITHIN THE DEPARTMENT OF PEDIATRICS AND CHILDREN'S HOSPITAL COLORADO

Indicate other areas of interest:

Return To:

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