



Have your GME office contact Michelle Maiorino to obtain an affiliation agreement. **An executed agreement between your GME program and our GME program is required prior to any rotation.**

The following documentation must be received in our GME office at least one month prior to the requested rotation, or the rotation will be cancelled.

1. Signed Affiliation Agreement
2. Letter of good standing with current hospital-based GME program, signed by program director
3. Photo ID
4. Proof of malpractice insurance by base hospital
5. **Proof of Nevada Training License or Nevada Medical License, issued by Nevada Board of Osteopathic Medicine, valid for dates of rotation (see contact information below)**
6. Curriculum Vitae
7. Copy of Complex Board Scores
8. Copy of Transcripts
9. Proof of personal health insurance coverage
10. Copies of current immunization records
11. Background Check
12. 10 Panel Drug test
13. ACLS/BLS

Upon receipt of all the above documents, you will receive a letter confirming the rotation dates. Valley Hospital Medical Center reserves the right to deny rotations.

PLEASE READ CAREFULLY BEFORE SIGNING: If selected as a visiting resident at Valley Hospital Medical Center, I will abide by the rules and regulations of the Hospital and GME.

Name (Please print) _____

Applicant's Signature

Date

Keep a copy for yourself and please return this application to: Michelle Maiorino via email or fax.

Email: michelle.maiorino@uhsinc.com

Fax: 702-388-7819

Phone: 702-477-6571

Contact Information for Nevada Training License:

Tammy Sines, Licensing Specialist

Nevada State Board of Osteopathic Medicine

901 American Pacific Drive, Suite 180

Henderson, NV 89014

Phone: 702-732-2147 X222

Toll Free 877-325-7828

Fax: 702-732-2079

Website: tsine@bom.nv.gov