

**Loyola University Stritch School of Medicine
Office of Registration and Records**

__ Book -, +
__ Schedule
__ Student EM
__ Coord EM

Clerkship Trading Form

Clerkships should be traded as far in advance as possible but will not be honored closer than six weeks before the clerkship starting date or after the hospital assignment lottery is drawn (if this occurs further in advance than 6 weeks).

Name _____ Class of 20 _____

Required Clerkship to be Traded: _____

Originally scheduled period: _____ Dates: _____ to _____
(e.g, 9A) (Month/Year) (Month/Year)

Requested new period: _____ Dates: _____ to _____
(e.g, 9B) (Month/Year) (Month/Year)

Student's Signature: _____ Date: _____

AND WISHES TO TRADE WITH:

Name _____ Class of 20 _____

Required Clerkship to be Traded: _____

Originally scheduled period: _____ Dates: _____ to _____
(e.g, 9A) (Month/Year) (Month/Year)

Requested new period: _____ Dates: _____ to _____
(e.g, 9B) (Month/Year) (Month/Year)

Student's Signature: _____ Date: _____

Please return form to Registration & Records, SSOM Rm. 220. Form may also be faxed to our office at 708-216-8151.

Upon receipt of this form in Registration and Records, the trade will be reviewed, and if acceptable, the students will receive acknowledgement of this change of schedule via email.