

**SPECIALTY** Family medicine

**Medical School or Hospital** UC - Davis

1. **How would you rate your overall experience? Poor/Fair/Good/Very Good/ Excellent**    Excellent
2. **How many hours did you work on average? Per day / Per week**  
40
3. **What were your daily duties? (Summarize)**    Seeing patients
4. **Who did you work with the most? NP's/ PA's/ Interns/ Residents/ Fellows/ Attendings**    Residents
5. **Which Attendings had the greatest influence on your education and experience?**    Resident director
6. **Did this rotation impact your interest in this program? How?**  
Yes. Made me want to go there
7. **Did this rotation help you get an interview? Yes**
8. **Did you get a letter of recommendation? No**
9. **Did you meet with or work with the Residency Program Director or the Department Chair? Yes**
10. **How did you apply for the rotation? Did you use VSAS?**    VSAS
11. **What month(s) was your rotation?**    September
12. **When did you apply? When did you get accepted?**    June, July
13. **Were there any special requirements for the rotation (i.e. BLS recertification, LOR, etc.)**    BLS
14. **Is Housing provided? If not, can you recommend housing options?**  
No, family, friends,
15. **Is parking provided? If not, any recommendations?**
16. **Would you recommend this rotation to future students?**
17. **Any other comments, suggestions or tips?**
18. **OPTIONAL: Would you like to include your contact information?**