



Albert Einstein College of Medicine

Office of the Registrar
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Clerkship Rotation Track Exchange Form (MD)

This form is due in the Registrar’s Office by April 1st no later than 4:00p.m. Only complete and exact track exchanges will be approved. Submissions with inaccurate information will be invalidated.

Student #1

Name (print): _____

Originally Assigned Track (e.g. A1, B3): _____

Student #2

Name (print): _____

Originally Assigned Track (e.g. A1, B3): _____

We agree to exchange our complete third-year track rotations.

Student #1 Signature: _____

Student #2 Signature: _____

Date: _____

*****REGISTRAR USE ONLY*****

Date Received: _____

Date Reviewed: _____

Date Approved: _____

Initials: _____