Mayo Clinic PA Program Information Sheet

Please complete the tables below. For the required tables, the first row is completed with mock information as an example. These hours will not be counted in your total hours.

PA Shadow Log Hours (Required)

Description of Activities (200 characters or less in list form)	Date	# Hours	Specialty	Contact Name; Email or Phone
EXAMPLE: Shadowed clinic patient care visits, several procedures, observed 1 surgery	12/1/2019	5	Family Medicine	J. Smith; smith.j@gmail.com
Total Hours				

Minimum of 2 half-days (half day = 4 hours) required.

Note: It's not unusual that applicants have shadowed other health care professionals in addition to PAs. This has great value in defining individual professional roles, but for this admission requirement only PA shadowing should be recorded.

Direct Patient Care Hours Log (Required)

Activity/Role	Description of Activities (200 characters or less in list form)	Date	# Hours	Contact Name; Email or Phone
EXAMPLE: CNA in Rose Hills Nursing Home		Part-time: Aug 2018- April 2019; Full-time: May 2019-July 2019	420	S. Jones; jones.s@gmail.com
Total Hours				

Minimum of 500 hours required.

Leadership, Community/Mission Service
(Optional)

Activity description	Date	Additional Information

Research, Awards & Honors Log
(Optional)

Award/Honors/Research	Date	Additional Information