

**Office of Experiential Education**  
**UC San Diego Skaggs School of Pharmacy and Pharmaceutical Sciences**  
**International Rotation Guidelines and Procedure**

**Background:**

Students are offered the opportunity to complete an international rotation as one of their seven APPEs required for graduation and can experience the practice of pharmacy in diverse cultural and clinical settings. Informational meetings will occur during the P3 year so interested student pharmacists can receive detailed information about specific requirements, instructions and deadlines. The Office of Experiential Education (OEE) reserves the right to deny or withdraw an approved International experience if the site and preceptors do not meet required programmatic standards, or affiliation agreement requirements, or if a student does not adhere to any section of the guidelines below.

**Guidelines:**

1. International rotation requests must be submitted by Nov 1<sup>st</sup> prior to the P4 year.
2. Students must submit the attached “International APPE Pre Rotation Questionnaire” electronically to the OEE and copy the email to the Director of APPE and Assistant Dean of OEE.
3. Students planning to complete an International rotation must be in good academic standing, progress through APPE block timeframes without delay, and demonstrate leadership skills and professionalism.
4. Any international rotation must be completed during Spring A block in the P4 year, and will be taken as an elective rotation.
5. Students will be expected to complete all application and pre-departure safety orientation requirements prior to travel, and any APPE requirements by deadlines including class meetings, student presentations, and experience reflection paper and rotation evaluations.
6. The OEE will provide information and instructions for UCOP Risk Services requirements for UC traveler insurance. Students are responsible for sourcing information and self-arranging appropriate visa, immunizations, travel logistics including flights and ground transportation, and accommodation.
7. Students are not permitted to switch international rotations unless there are extenuating circumstances. Students will make all requests through the OEE via submission of a “Rotation Change Request Form”.
8. The OEE will be the primary point of contact and communication between the school and the proposed site. The student may be requested to provide contact information for the preceptor/site.
9. Submitting an international rotation request does not guarantee the request will be granted.
10. Before a rotation is permitted to start, the site must be approved by OEE and a site affiliation agreement or Memorandum of Understanding must be finalized between the experiential site and UC San Diego SSPPS.

**Student Application**  
**UCSD SSPPS International APPE Pre Rotation Questionnaire**

<b>Student Name :</b>	
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**DEADLINE FOR SUBMISSION OF REQUEST EACH ACADEMIC YEAR IS NOV 1ST**

1. Complete and submit all materials to the APPE Coordinator via email.
2. Fill out the below information **exactly** as requested:

**Date Submitted:** \_\_\_\_\_

Desired international APPE destination			
Name of Country :			
Name of the rotation site (e.g., hospital, pharmacy):			
Rotation site address :			
Is the rotation site affiliated with a University?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>	If yes, provide name of University:
Contact information of the proposed preceptor			
Full Name :		Phone :	
Email :			
Describe their Qualifications:			
No preceptor identified :	Describe where you are in the process of identifying a preceptor:		
Country familiarity			
Have you been to this country before :	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>	
Do you have family or friends in the country?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>	If yes, describe:
Do you have a place to stay in the country?	Yes : <input type="checkbox"/>	No : <input type="checkbox"/>	If no, describe your plans for accommodation:

Official language and competency							
Official language used in the country :							
Official language competency :	a. Please rate according to the Interagency Language Roundtable (ILR) Scale below ( <a href="https://en.wikipedia.org/wiki/ILR_scale">https://en.wikipedia.org/wiki/ILR_scale</a> ):						
	Ability	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5
	Speaking						
	Listening						
	Reading						
	Writing						
b. Footnote on ILR Scale levels: <ul style="list-style-type: none"> <li>i. Level 0: No proficiency</li> <li>ii. Level 1: Elementary proficiency</li> <li>iii. Level 2: Limited working proficiency</li> <li>iv. Level 3: Professional working proficiency</li> <li>v. Level 4: Full professional proficiency</li> <li>vi. Level 5: Native or bilingual proficiency</li> </ul>							

2. What do you want to achieve from this rotation? Provide goals & objectives.

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3. What specific advanced pharmacy experience, which cannot be obtained in the U.S., do you want to gain?

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4. Why is this APPE important to you?

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**For questions, contact the Office of Experiential Education:**

Dr. Christina Mnatzaganian  
Associate Dean for Experiential Education  
[cmnatzaganian@health.ucsd.edu](mailto:cmnatzaganian@health.ucsd.edu)  
[\(858\) 822-5642](tel:(858)822-5642)

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**For ICE Committee and OEE Office Use only:**

**International Experience Criteria Site Review:**

<b>Check all of the following:</b>	<b>Yes</b>	<b>No</b>
<b>1.</b> Is the student in good standing? (Student Affairs):	<input type="checkbox"/>	<input type="checkbox"/>
<b>2.</b> Is there a UCSD faculty liaison? (OEE and/or ICE Committee):	<input type="checkbox"/>	<input type="checkbox"/>
<b>3.</b> Is there a qualified preceptor on site? (Student contact or Institutional Agreement, ICE Committee):	<input type="checkbox"/>	<input type="checkbox"/>
<b>4.</b> Does the rotation site meet competency requirements? (OEE and ICE Committee) :	<input type="checkbox"/>	<input type="checkbox"/>
<b>5.</b> Is there an active institutional MOU between UCSD SSPPS and the site? (Dean's Office, ICE Committee):	<input type="checkbox"/>	<input type="checkbox"/>
<b>6.</b> Request Granted:	<input type="checkbox"/>	<input type="checkbox"/>

**Decision and Outcome of Request:**

<b>OEE Printed Name:</b>	
<b>OEE Signature :</b>	
<b>MOU Agreement :</b>	<b>Active :</b> <input type="checkbox"/> <b>In Process :</b> <input type="checkbox"/> <b>Completed :</b> <input type="checkbox"/>
<b>OEE Comments (optional):</b>	