

INDIVIDUALLY-DESIGNED SELECTIVES

1. The Individually-Designed Selectives (IDS) selective options available in the Personalized Education Plan (PEP) period to students who are interested in a course or topic for which a regular selective does not exist. Students must submit request under approval of their Advisor, responsible faculty of whom will be evaluating the experience, and PEP Director. These ID selectives should be related to the third year goals “individualized course work, during which students will delve deeper into specific clinical areas and continue to work on clinical skill and professional development.”
2. A student must be in good academic standing (determined by Student Progress Committee) to enroll and participate in an IDS experience. IDS must be **clinically based**, with SIU faculty and conducted on campus (no away or Non-SIUSOM rotations will be offered in the third year). No research or conference applications allowed in the third year.
3. You must submit a completed Approval Request for Individually-Designed Selective in [Laserfiche Forms \(use Chrome or Firefox\)](#)

☆ EPC: Selective & Elective Requests

Process that assists with approving & enrolling students in courses for credit. Y3 fo...

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form together with your proposal in the required policy format noted below. **The completed request and proposal must be submitted AT LEAST THREE (3) WEEKS prior to the start of the selective.** IDS proposals are reviewed for approval on a case-by-case basis by the Y3/4 Coordinator and the Chair of the Year Three Curriculum Committee, and are granted if approved.

4. **Approval Process:** The **signatures of the Advisor, responsible course faculty evaluating the experience, and department PEP Director of the selective offering being sought** will be obtained through Laserfiche as processed through the system for final review and approval. The faculty who will directly supervise and evaluate you must be noted with approval as responsible faculty. You must provide a complete course description to your Advisor, responsible faculty, and departmental PEP Director when requesting their approval.
5. The following **format** should be used when preparing a proposal for an Individually-Designed Selective.

Title: Choose an appropriate name for the selective.

Description: Provide a brief but detailed narrative describing the purpose, content area, activities planned, and logistics of your proposed selective experience. Include any special information or arrangements (e.g., if the experience is designed in conjunction with other experiences, community agencies or other departments, etc.) that will help us understand what you propose to do.

Please describe the clinical patient care activities you will undertake and indicate the proportion of course time this will involve.

Objectives: Outline the specific learning objectives you plan to accomplish that are measurable. Be realistic and practical. This section and the course description section create the information base upon which your proposal will be evaluated.

Evaluation: Describe the method(s) faculty will use to evaluate your performance (observation, written exam, oral exams, discussion with faculty, etc.). This section should parallel your activities and objectives. A minimum one page reflective report for clinical experiences along with the patient log is required. You may use the online form to maintain the patient log. If you are writing a paper for the course, you should submit that instead of a report.

Faculty: Name of the faculty member who has agreed to supervise you in the selective. Provide complete contact information of the faculty mailing address, email address, and telephone number.

Dates: Indicate the length (number of weeks) of the experience and the dates when the selective will be taken.

6. **Students MUST adhere to the deadline in submitting the appropriate documentation. Lack of attention to this detail will result in denial of experiences.**

Updated: 1/2024