Stanford Hospital & Clinics

House Staff Contract

TO: 
DATE: 

This will advise you that your appointment as a in for the period beginning and ending has been approved subject to your satisfactory completion of any course of training which is prerequisite to appointment. This offer is subject to verification of your authorization to work as required by the Immigration Reform and Control Act of 1986.

This appointment constitutes an essential step in the completion of your medical training and education. It is subject to the requirement that you comply with all the laws, policies, rules, regulations and procedures governing the practice of medicine and the conduct of house officers at Stanford Health Care; and at any other institutions to which you may be assigned, that your performance in the course of the training program is satisfactory, and that you abide by the Principles of Medical Ethics of the American Medical Association.

Your training program at Stanford may include assignments to Stanford University Medical Center and/or other affiliated institutions. The stipend at Stanford Health Care will be at least $ per month.

A description of current benefits available to house staff and applicable policies and procedures are set forth in the House Staff Policies and Procedures. The contents are subject to periodic revision, including additions and deletions. Revised pages will be sent to all house staff as appropriate. Questions concerning current applicability or any question which is not covered by a written policy, including any request for an exception, should be referred to the Director, Department of Graduate Medical Education.

If the foregoing terms and conditions are satisfactory, please sign this contract.

APPOINTMENT APPROVED:

______________________________  ________________________________
Program Director                  Director of Graduate Medical Education

I have read and understand the attached copy of House Staff Policies and Procedures.

______________________________  ________________________________
Signature of House Officer             Date

Contract Notes: (none) 
Attachment: