Request for an Additional NHSC Scholar or Student to Service Clinician

Please fax completed form to (301) 480-1684, or email it to the NHSCScholar@hrsa.gov

Sites interested in hiring more than one National Health Service Corps (NHSC) Scholar or Student to Service (S2S) clinician from the same Class, and discipline (if applicable), must provide a justification of need. Please describe the site's special circumstances that prevent it from effectively meeting the health care needs of its community, and how an additional NHSC clinician will fill a long-standing unmet need and increase the possibility for clinician retention. Examples of need include, but are not limited to, the following:

1. Recent expansion of services.
2. Proportion of patients seen to that of patients needing to be seen.
3. Number of patients each clinician sees weekly (include each clinician's discipline and specialty).
4. Average Length of time patients wait to be seen at the site.
5. Any public health situations unique to the area.

Site Where the NHSC Clinician Will Serve his/her Obligation:

Site ID Number: _____ Site Point of Contact: _____

Point of Contact E-mail Address: _____

Site Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Site Telephone #: _____ Site Fax #: _____

Primary Care HPSA Score: _____

Dental HPSA Score: _____

Mental Health HPSA Score: _____

**If the NHSC clinician will work at more than one site, please list each additional site's ID Number, Address, and HPSA Score in the space below:

Please provide the name(s) of the clinicians the site has already identified as potential NHSC hires, his/her profession, and specialty:

Name:_____

Name:_____

Professions: PHYSICIAN, DENTIST, NURSE PRACTITIONER, CERTIFIED NURSE MIDWIFE, PHYSICIAN ASSISTANT

Specialties: PEDIATRICS, INTERNAL MEDICINE, FAMILY MEDICINE, OB/GYN, PSYCHIATRY

JUSTIFICATION FOR AN ADDITIONAL NHSC CLINICIAN:

Name and Title of Site Official:_____

Signature:_____ Date:_____

NHSC USE ONLY

Request is Approved By

Director, Division of Regional Operations:_____

BHW Associate Administrator:_____