

MEDICAL ELECTIVE SPEC 4000
CARDIOLOGY & CARDIOVASCULAR SURGERY

APPLICATION INFORMATION

Thank you for your interest in McGovern Medical School's Cardiovascular Surgery and Cardiology elective. Below you will find the procedures and required documents needed in order to be considered to rotate with our department.

All completed application packets must be mailed to the following for review (please **do not** mail them to any other address for they will not be processed):

Center for Advanced Heart Failure
Attn: Savannah Torres
6400 Fannin, Suite 2350
Houston, TX 77030

Documents required with an application packet:

- 1) Application page signed by school official
- 2) Official transcript (you will need an official printout of grades with the Dean's signature)
- 3) Copy of health insurance or a letter stating you will purchase through McGovern Medical School on your first day.
- 4) Copy of malpractice insurance or a letter stating you will purchase through McGovern Medical School on your first day.
- 5) Immunization Form completed with copy of vaccination certificate
- 6) Dean's letter (stating student is in good standing with his/her home school)
- 7) Language Certificate
- 8) 2 letters of recommendation

Documents required to obtain I-20 VISA form: (Information on next page)

- 1) Biodata Student Information Form
- 2) Bank account statement at least \$3347balance
- 3) Photocopy of passport biodata page(s)

IMPORTANT: Only submit original and completed documentation. Incomplete packets will be denied to rotate. The deadline for application packets are **4 months before** the requested start date. Any application packets that are received after the deadline will be denied.

CONTACTS

Student Affairs (Application Processing) - Noemi Giron - Noemi.Giron@uth.tmc.edu
Office of International Affairs (Visa Requirements) – Ph:713-500-3176 Email:
utoiahouston@uth.tmc.edu Program Coordinator (Program Information) – Savannah Torres:
Savannah.Torres@uth.tmc.edu

DOCUMENTATION FOR OFFICE OF INTERNATIONAL AFFAIRS

In order to determine your eligibility for the issuance of Form I-20, Certificate of Eligibility for Non-Immigrant Student status, it will be necessary for you to provide our Office with the following documents:

- [Biodata Student Information Form](#)
- Legible copy of your **Passport Biodata Page(s)**
- **Legible copy of Bank Letter** or **Legible copy of Original Bank Statement** which includes:

Original Bank Letter

1. Letter ensuring at least \$3,347 per month of attendance
2. Name of bank account holder
3. Date of issuance
4. Type of account
5. Bank Official's signature or bank stamp/Seal
6. Official Bank letterhead including bank name
7. Address logo or heading

Original Bank Statement

1. Bank Statement showing at least \$3,347 per month of attendance
2. Name of bank account holder
3. Date of issuance
4. Type of account
5. Official Bank letterhead including bank name
6. Address logo or heading

Please note: We *cannot* accept the following types of accounts:

- Retirement funds
- Real estate funds
- Trust Funds
- Salary statements
- Credit card statements

- **Original Signed Written Certification of Sponsorship** which includes:
*ONLY If the Original Bank Letter or Original Bank Statement will be provided by a sponsor
 - Your name
 - Your Sponsors name
 - Relationship
 - Amount they will be sponsoring you for
 - Duration of sponsorship
 - Sponsors signature
 - the amount and
 - Period your sponsor is committing to support your stay in the U.S.
 - Signature of sponsor

Please Note: Financial documents must be in English or accompanied by a Certified English translation and must be in U.S. dollars. We also *cannot* accept financial documents that are older than 6 months. Students who are applying to rotate for 2 electives must supply all documents in two original copies. The bank certificate must be issued in the amount of \$6,694.00.

Mail all documents listed above to the address listed below so that your eligibility for the issuance of Form I-20 may be determined.

You **MUST** be in your final year of medical school in order to apply for elective(s) at McGovern Medical School. Please note departments won't review elective applications until McGovern students' schedules are finalized. After that time, applications will be processed once all required materials and verifications are received. If you are applying for an elective at the Lyndon B. Johnson Hospital (LBJ) you will be required to have transportation. **APC electives are not open to visiting students and will not show up on the visiting student catalog.**

International - Visiting Students are limited to no more than **two (2)** electives. Before your application can be reviewed, we must receive all of the **original documents** in **English** (Photocopy or facsimile will not be accepted). A separate complete application packet must be submitted for each elective block. The Office of Admissions and Student Affairs will notify you by e-mail if space is available in the time period you requested. Approval to rotate at The McGovern Medical School is granted solely by the Office of Admissions and Student Affairs. **Approvals obtained directly from department coordinators will not be honored.** Applications are not accepted for the month of May (Block 1), June (Block 2), July (Block 3). Please visit our website for block schedule <https://med.uth.edu/admissions/wp-content/uploads/sites/64/2022/02/Instructions-for-Visiting-Students-NonUS-AY22-23.pdf>. Normal process time for an application is 3-4 weeks. However, all required documents mentioned below and application fee must be received in the Office of Admissions and Student Affairs **4 months** before the requested start date.

*The following must be **ORIGINAL** documents in English. Photocopies or fax copies will **NOT** be accepted.*

1. Official medical school transcript (must list courses taken and notation of level of achievement in each course).
2. Dean's letter and two clinical faculty letters of recommendation.
3. Verification that you have completed all clinical rotations (grades must be posted on your official transcript), which include **OB/GYN, Pediatrics, Surgery, Psychiatry, Neurology, and Internal Medicine.**
4. Verification that you are covered by malpractice insurance with coverage amounts. Malpractice insurance is available through The McGovern Medical School for an addition fee that you will pay on the first day of your rotation, if your school does not cover you. Please attach a letter with your application stating you will purchase McGovern Medical School's malpractice insurance.
5. **Please note that you MUST have taken and passed the United States Medical Licensing Examination Step 1. Please provide a copy of your official score report, front and back, showing scores for USMLE 1.**
6. Verification of Immunizations, including the completion of Hepatitis B vaccination series or proof of immunity and COVID vaccinations/boosters.
7. You are required to have health insurance coverage with medical evacuation and repatriation- please send a copy of this coverage with your application. If you prefer you could purchase it through The McGovern Medical School on your first day during orientation. The cost for the medical insurance is \$277.00 per month and includes the AES (Evacuation/Repatriation). The current cost for Annual AES (Evacuation/Repatriation) \$96.00, Spring AES (Evacuation/Repatriation) \$40.00, Summer AES (Evacuation/Repatriation) only \$24.00.
8. If you are attending a medical school in a country whose official language is **NOT** English, you must provide either a notarized statement that English is your native language **OR** a certificate of completion of a course in the English language stating your proficiency in written and spoken English.
9. A \$350 (USD) per month **non-refundable** application fee for each application. Application fee must be a money order drawn on a U.S. bank and made payable to "UT-HSC". **PLEASE DO NOT SEND CASH or PERSONAL CHECK and WE CAN'T ACCEPT MONEY TRANSFERS.**
10. There is a \$100 (USD) charge for any change to your approved application. **You must notify us by email with your cancellation request.** If you make any changes to your application, you must mail your new request application page with your \$100 money order. Your new application sheet must be signed by your school with your new request.
11. Imprint of your official school seal is required on the application.
12. **Upon approval for a medical elective and in accordance with university policies and federal regulations, all Non-US citizens must follow directions from the UTHealth Houston Office of International Affairs. Upon acceptance for a medical elective an international visitor advisor will contact you to provide you with vital information on how to apply for your F-1 Student VISA, which is the ONLY (student) visa accepted by this institution. If your F-1 Visa Stamp is granted, your first obligation under the F-1 visa mandates a check-in with the UTHealth Houston Office of International Affairs Office upon your arrival in Houston.**

If you need further information, please contact Noemi Giron at 713-500-5166 or Noemi.Giron@uth.tmc.edu

Our elective catalogue is located at <https://med.uth.edu/admissions/student-affairs/visiting-student-course-catalog/>

We are unable to provide housing or parking for visiting students. For parking options please call the Texas Medical Center Parking Office at 713/791-6161 or www.tmc.edu. For map(s) of the Texas Medical Center go to: www.maps.tmc.edu.

It is your responsibility to ensure that all the above requirements are met; we will NOT contact you if you fail to provide the materials required. Your home institution will be notified if you fail to appear for an accepted elective.

**THE McGovern Medical School formally known as UTHealth at Houston
Elective Application Form for International Medical Students**

Office of Student Affairs
6431 Fannin, Room MSB. - G400, Houston, Texas 77030

713/500-5167

Parts I and II are to be completed and returned to the above address. **Only Original Documents accepted**

PART I (Please type or print)

NAME: _____ EMAIL: _____
(Last) (First) (Middle Initial)

CURRENTLY ENROLLED AT: _____ (Name of Medical School) _____ (Graduation Date)

MAILING ADDRESS: _____

(Street and No.) (City) (Country)

*CITIZENSHIP _____ *VISA STATUS _____ PHONE NO. __ (____) _____

AMOUNT PER MONTH FOR STAY IN U.S.: \$ _____ SOURCE OF FUNDS: _____

DATE OF BIRTH: ____/____/____ PLACE OF BIRTH: _____ *RACE: _____ *SEX: _____
month day year

COURSE FOR WHICH APPLICATION IS MADE: 1st Choice _____ Date: _____
(All choices must be in same department) month/day/year
2nd Choice _____
3rd Choice _____

STUDENT SIGNATURE: _____ DATE: _____

*Information is required in compliance with Titles VI and VII of the Civil rights Act of 1964. This information in no way affects the processing of your application.

PART II

APPROVAL FROM APPLICANT'S SCHOOL

(To be filled out by appropriate official)

OFFICIAL SCHOOL SEAL REQUIRED

The person named above is a _____ year medical student in a _____ year program and is in *good standing* at this school. This student (*will / will not*) pay tuition at our school during the period indicated. Personal health coverage (*is / is not*) in effect from our school. This student (*is / is not*) covered for liability or malpractice insurance during the period indicated. This student is approved for (*credit / non-credit*) and (*will / will not*) require written evaluation at the conclusion of this elective. This student (*has/has not*) been instructed in the safety and precautions for infection control.

This student applicant has taken and passed USMLE Step 1

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE: _____

SCHOOL: _____ PHONE: _____

ADDRESS: _____

Please send application to:

McGovern Medical School

6431 Fannin

Suite MSB G400

Houston, TX 77030

Attn: Noemi Giron

VISITOR'S NAME: _____

Child

_____ LAST/FAMILY NAME	_____ First/Given Name	_____ Middle
_____ Date of Birth (MM/DD/YYYY)	_____ City of Birth	_____ Country of Birth
_____ Country of Citizenship	_____ Country of Legal Permanent Residence	<input type="checkbox"/> Son <input type="checkbox"/> Daughter

Child

_____ LAST/FAMILY NAME	_____ First/Given Name	_____ Middle
_____ Date of Birth (MM/DD/YYYY)	_____ City of Birth	_____ Country of Birth
_____ Country of Citizenship	_____ Country of Legal Permanent Residence	<input type="checkbox"/> Son <input type="checkbox"/> Daughter

Child

_____ LAST/FAMILY NAME	_____ First/Given Name	_____ Middle
_____ Date of Birth (MM/DD/YYYY)	_____ City of Birth	_____ Country of Birth
_____ Country of Citizenship	_____ Country of Legal Permanent Residence	<input type="checkbox"/> Son <input type="checkbox"/> Daughter

Section IV: Mailing Instructions



If OIA determines that you are eligible for the Form I-20, your advisor will contact you with information on your shipping options.



Student's Signature: _____

Date: _____

VISITOR'S NAME: _____



Office of International Affairs

Biodata Information Form

F-1 Student

An F-1 student is a nonimmigrant who is pursuing a full course of study to achieve a specific educational or professional objective at an academic institution in the United States, which has been designated by the Department of Homeland Security to offer courses of study to such students. The Office of International Affairs (OIA) must determine a student's eligibility to be issued a Form I-20 to be used when applying for the F-1 visa at a U.S. Embassy or Consulate abroad, or if the student is already in the U.S., by sending the Form I-20 to U.S. Citizenship and Immigration Services when applying for a change of status to F-1.

Students admitted to a program of study at The University of Texas Health Science Center at Houston must complete and sign this form and return all original documents to OIA at the address below in order to determine eligibility for the Form I-20.

Section I: Student Information

LAST/FAMILY NAME

First/Given Name

Middle

Date of Birth (MM/DD/YYYY)

Gender: Male Female

Telephone Number

E-mail Address

City of Birth

Country of Birth

Country of Citizenship

Permanent Address in Home Country:

Home or Apartment # and Street

City

State/Province

Country

Postal Code

Section II: Immigration Information

Are you currently in the U.S.? Yes No

VISITOR'S NAME: _____

- If yes, please indicate your current visa type: _____
- If current visa type is F-1, student must comply with the instructions given in the **Transfer-In Form**
- Please contact your International Visitor Advisor (IVA) at OIA if you are not in the U.S. on the F-1 visa but are considering changing your visa status to the F-1 student visa.

Are you in the U.S. on a visa that restricts employment or full-time enrollment? Yes No

- If yes and you will accept the academic program, please indicate below how you will seek F-1 status:
 - I will depart the U.S. and apply for the F-1 visa at a U.S. Embassy or Consulate abroad
 - I will apply for a change of status to F-1 while remaining in the U.S.
- Please contact your IVA at OIA if your current visa type restricts you from being employed in the U.S. or engaging in full-time enrollment

Are you currently attending or have you recently graduated from another school/institution in the U.S.? Yes No

- If yes, are you currently authorized optional practical training? Yes No

Section III: Dependent Information

Will you be accompanied by your spouse or unmarried child (under the age of 21) who will seek F-2 status?

Yes No

- If yes, please provide legible copies of your dependent(s) passport biographical page (which should include picture, name, and expiration date.)
- Marriage certificate and/or birth certificates. All documents not in English must be accompanied by a certified translation.
- Please also provide the following information:

Spouse

_____ LAST/FAMILY NAME	_____ First/Given Name	_____ Middle
_____ Date of Birth (MM/DD/YYYY)	_____ City of Birth	_____ Country of Birth
_____ Country of Citizenship	_____ Country of Legal Permanent Residence	

Child

_____ LAST/FAMILY NAME	_____ First/Given Name	_____ Middle
_____ Date of Birth (MM/DD/YYYY)	_____ City of Birth	_____ Country of Birth
_____ Country of Citizenship	_____ Country of Legal Permanent Residence	<input type="checkbox"/> Son <input type="checkbox"/> Daughter

IMMUNIZATION HISTORY FORM

Name: _____

Date of Birth: _____

Telephone Numbers: Home: _____

Mobile: _____

Required Immunizations:

Immunization	Date	Immune Titer (Attach results)
1) Tetanus/Diphtheria/Pertussis (Tdap)	#1 ___/___/___	
2) Tetanus toxoid (Td)	#1 ___/___/___	
3) MMR	#1 ___/___/___ #2 ___/___/___	
4) Measles	#1 ___/___/___ #2 ___/___/___	OR ___/___/___
5) Mumps	#1 ___/___/___	OR ___/___/___
6) Rubella	#1 ___/___/___	OR ___/___/___
7) Hepatitis B	#1 ___/___/___ #2 ___/___/___ #3 ___/___/___	OR ___/___/___
8) Influenza	___/___/___	
9) COVID	___/___/___ ___/___/___	Booster: ___/___/___
10) Varicella (chicken pox)	#1 ___/___/___ #2 ___/___/___	OR ___/___/___
History of Varicella	___/___/___	
11) Tuberculin Skin Test (PPD)	Date Placed: ___/___/___	Date Read: ___/___/___
	Results: _____	Millimeters of induration: _____
	-OR-	
	History of positive reading:	Date: ___/___/___ Results: _____
	Chest x-ray results (Attach copy of radiology report):	Date: ___/___/___ Results: _____

Verification of Information:

Signature of Health Care Provider: _____

Clinic or Office Name: _____

Telephone: _____

Fax: _____

Housing for Visiting Students

Updated 2/3/2020

1. FAVROT TOWER APARTMENTS

www.tmc.edu ; click on HOUSING link

2. Linda Vista Apartments

Call Mary Lee for availability

713/799-8424 or 713-894-5532

Email: maryleelindavista@sbcglobal.net

Town-home (6815 Staffordshire Blvd.) is located 5-10 minutes walking distance to TMC. The resident has a private bedroom with TV and desk, private bathroom and full kitchen privileges. No deposit required and cost is \$850.00 per month.

3. HOMESTEAD HOTEL

www.homesteadhotels.com fill in information for Houston/Medical Center

4. ECONO LODGE at MEDICAL CENTER

7905 S. Main, Houston, TX

713.667.8200

5. Best Western Park Place Suites

Sonia Moore, Sales Manager

1400 Old Spanish Trail

Houston, TX 77054

713.796.1000

6. Archstone Brompton Court

7510 Brompton Blvd

Houston, TX 77025 **Nino Corporate Lodging**

713-660-7071 / 877-784-8348

Archstone Brompton Court offers captivating old world architecture with unique floor plans situated among mature trees and lush landscaping. Many floor plans have angled walls, lots of windows and spacious living areas. Located only minutes from the 610 Loop, Highway 59, the Museum of Fine Arts, fine dining and the world famous Texas Medical Center.

Directions:

From the 610 Loop, exit Highway 59 (Downtown) to Kirby. Turn right on Kirby to Holcombe and turn right. Follow to Brompton and turn left. We're on the right.

Features:

- Newly renovated interiors
 - Covered parking
 - New Fitness center
 - Limited access gates
 - Shuttle bus service 7 days a week to Texas Medical Center and Rice
 - On-site convenience store
 - 5 swimming pools (one heated)
 - 11 on site laundry rooms
- *In selected plans

7. Rooms for Rent

Two furnished rooms for rent in a new home located in a nice neighborhood near 610 and Stella Link and is close to Reliant Stadium. All bills are paid \$475/month/room.
For more information, call Tamara at 713-668-3921.

8. NINO Corporate Lodging, INC.

Susan Starnes
713-964-4747
Nationwide: 1-888-550-NINO
Email: susan@relo-nino.com
www.relo-nino.com

9. Archstone Medical Center

8181 Fannin
Houston, TX 77054
Nino Corporate Lodging
713-660-7071 / 877-784-8348

Archstone at the Medical Center is convenient to shopping, entertainment and employment centers. Make a splash in our resort style swimming pool, or work out in our state of the art fitness/aerobics center. Distinctive architecture and lush landscaping complement fresh interiors that provide the latest in comfort and convenience. Your new apartment home comes complete with full size washer and dryer, private balcony or patio, storage, spacious walk-in closets and much more!

Directions:

Take the 610 South Loop west to the Fannin exit. Exit Fannin and turn left. Continue past Naomi and Holly Hall. Archstone at the Medical Center will be on your right.

Features:

- Sparkling Pool and Volleyball
- Clubhouse & Fitness Center
- Resident Business Center
- Resident Theater
- Aerobics Classes
- Covered Parking and Garages Available
- Detached Storage Rooms
- Controlled Access Gates
- Picnic Areas
- Shuttle bus service 7 days a week to Texas Medical Center and Rice Village

10. GARDENHOUSE FOR RENT !

Fifteen minutes drive from Medical Center, small furnished garden house, in excellent neighborhood/ high security, available for \$ 400./month, all utilities included. Ideal for visiting student, or for full-time student. Call: Mrs.Rose Bodor,
(713)467-2898

11. Room For Rent

1 bedroom available in a 3 bedroom home. \$550 for one month \$900 for two months, bills included, no deposit necessary.

Perks:

-15 min from medical center
-newly furnished bedroom
-you will have your own bathroom
-high speed internet available
-1/2 of the two car garage
-1 bedroom has been turned into an office for study
Homeowners: I attend UTHSC and my husband works downtown.

Please contact andrea.m.fuller@uth.tmc.edu with "interested in renting room" in the subject line.

12. We've had the opportunities to serve the housing needs of many trainees of the medical center who were all pleased with the quality and convenience of our condos, and would like the opportunities to continue to do so in the future.

Several 2 bedroom 2 bath condos rented out as individual rooms to people who come to the medical center for short term basis. We match the trainees by gender.

Please note: our policy is no pets & non-smoking

View the photos at:

<http://www.flickr.com/photos/11900617@N07/>

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HOME AWAY FROM HOME:

Fully furnished condo with fully equipped and functional kitchen

Each room has its own separate keyed access.

The common areas are kitchen (Washer/Dryer)/living room/dining room/private balcony.

Includes electricity, cable TV, internet access

Basic linens are provided.

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(\$800-950.00/room/month – based on availability/size of room

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LOCATION! LOCATION!

Public transportation:

Unit resides along the Houston Metro 87 route, and closest major intersection is El Paseo and Cambridge (Approximately 10 minutes to Texas Medical Center).

Walking distance to Kroger grocery store and Pharmacy on Cambridge.

Easy access to major highways: 610 & 288

We are close to the following institutions:

UT Dental School	Baylor Medical School	UT Nursing School
Prairie View A&M Nursing School	UH Pharmacy School	
MD Anderson St Lukes	Texas Heart Institute	
Texas Childrens' Hospital	Methodist Hospital	Herman Hospital
University of Houston	Rice University	

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LEASE TERMS:

There is a 1 month deposit, and can be paid up to two weeks in advance. We do not accept deposits prior to that.

Once a deposit is made and a lease contract is signed, the unit or room is reserved for you. All terms and conditions are stated in the lease contract which a potential tenant is required to review prior to making a deposit.

Please e-mail questions to medcondo@yahoo.com.

Thank-you.

13.

http://med.uth.tmc.edu/administration/stud_affairs/opportunities/housing.htm

14. Visiting the Texas Medical Center for a rotation? Or need a long term lease?

12x12 furnished bedroom or unfurnished 14x14 bedroom both with private bath and closet in a lovely 3/3.5 townhouse less than 1 mile from the med center - easy walk/bike ride! Right next to large park (Hermann Park) with jogging/biking trails and golf; 15 minutes to the downtown nightlife. I am a commuting engineer, quiet and easy going, and I love to cook. Women preferred, and no smokers. \$900 for the month all bills included. Contact Marilee at maremyres@yahoo.com or 713-796-9143.

15. www.rotatingroom.com

16. 550-600 sq ft master bedroom in a 1033 sq ft, 2 bed/2 bath condominium available for short term rent. Master room contains a queen size bed, equipped with a study desk, private bathroom, and large spacious closet. Condo is newly renovated,

2nd story corner unit, w/ great views of the pool. Fully furnished w/ washer/dryer, dishes, stove, refrigerator, oven, microwave, dishwasher. Internet access (wireless/LAN) & cable TV included. Easy access to BCM, UTH, Rice, TMC institutions, grocery stores, UT rec center/gym/parks, Metro bus stops, major highways - 610/59/288/45. Memorial/Galleria, Rice Village, Hermann Memorial Park, Museum District. No smoking, pets, or loud parties. 1 assigned parking space (covered) + ample guest parking. Please contact chl1357@gmail.com, if interested. Room will be available beginning October 2011. Rent \$550/month. Security deposit of \$100 required. Split electric bills. Photos available upon request. Perfect for visiting, short term students.

17. 2 bed/2 bath - 1000 - 1100 sq ft. Newly renovated condominium. 2nd story corner unit, w/ great views. Has washer/dryer, stove, refrigerator, oven, microwave, dishwasher. Close to TMC institutions, grocery stores, UT rec center/gym/parks, UTHSC shuttle, Metro bus stops, major highways - [610/59/288/45](#). Great access to BCM, UTH, Rice, TMC institutions. Memorial/Galleria, Rice Village, Hermann Memorial Park, Museum District. Rent \$1000. Perfect for a family, or roommates. No smoking, no pets, please. 2 assigned parking spaces (one covered, one uncovered). Please contact liansimloo@yahoo.com, (936) 524 - 6960. Available immediately.

18. Single room in good, clean condition (~200 sq ft) in 2 bedroom/1 bathroom condominium (850 sq ft):

Short term rental (private room, shared bath, \$500/month - everything included). Amenities include: Free parking, A/C, heating, kitchen, wireless internet, cable TV, laundry. Fully furnished. Security guard on premises. Unit is located in the heart of the Texas Medical Center. Local gym, grocery store all within walking distance. Easy access to local transportation (bus #87), major freeways ((phone number hidden), Bush, Hobby Airports). Close to major attractions (Reliant Stadium, Downtown, Rice Village, Hermann Park, Montrose, Heights, and Memorial Park). Great for visiting students, solo travelers, bootstrappers looking for nice quiet, clean, temporary place to stay for a reasonable price during their visit to Houston. Please contact chl1357@gmail.com, if interested.

19. Furnished bedroom with private bath in 2/2 condo

Perfect those in need of temporary housing for \$650/mo (or \$25/day) (preferably female student or professional in medical field; 2 small dogs on premises) Walking distance from KROGER (Old Spanish Trail/Cambridge) On Metro bus line #87 and UT shuttle services Safe, gated community with on-site security guard at the Medical Center Condominium Washer and dryer, basic cable, water, electricity, and wi-fi internet included

Contact # 832-372-0457 ... available after 12/25/12

20. Rodeway Inn and Suites Medical Center Hotel

6712 Morningside Drive
Houston, Texas 77030
[\(713\) 663 - 6200](tel:7136636200)
Newly Renovated with kitchenettes. Quiet Location.
Special Monthly rates.
Walking distance to Tx Medical Center, Rice University/Village
Call, or go to website listed for details.
www.rodewaysuiteshouston.com

21. Room for Rent - Centrally located. Perfect for Students/Residents.

I have an extra furnished room available for rent. It has a very comfortable bed with closet and own bathroom. The apartment is clean, smoke and pet free. Amenities include TV, cable, wifi, kitchen, living room and access to a pool. It's located in Montrose area on Bagby and Westheimer. The apartment is in a great location with walking distance to a grocery store, gym and restaurants. The rail/metro is within a 5 minute walk. This provides access to downtown and a 10 min ride to the medical center. Perfect place for students with internships and rotating medical students/residents. Weekly and monthly rates available. The rate is \$175/week and \$650/month. Contact me at cynthia.m.barrera@gmail.com.

22. 1463 Drew Street; Houston, TX 77004

1 bedroom with own private bathroom available in a 2 bedroom/2 bathroom 3-story townhouse in Midtown. Your bedroom/bathroom is fully furnished with a bed and TV and on the 1st floor, kitchen/living room is on the 2nd floor, and master bedroom is on the 3rd floor. Built in 2001. \$850 includes all utilities + Internet Washer/Dryer, Internet, Refrigerator/Kitchen access with Keurig coffee maker, attached garage parking spot included. Roommate is a Baylor medical resident.

Evan Wu

510-725-0028

Nave119@gmail.com

23. Beautifully furnished room available in a two bedroom condo at the Valencia. Located on Old Spanish Trail with easy access to the rail. 24 hour security. Rent \$1000/month. Call for more details Nikki Somani 925-786-1439.