



A nonprofit organization founded in 2005, sponsored by the UCR School of Medicine

Mission Statement

To provide free medical care to the indigent population of the Inland Empire

Executive Director

Richard Wing, Ph.D.

Medical Director

Paul Lyons, M.D.

Pharmacy Director

Scott Glenny, PharmD

Clinic Managers

Vincente Lam
Katherine Tsai

Pharmacy Manager

Amanda Golay

Medical Student Representatives

Alden Holmes
Jonathan Scott

Clinic Monitor

Kevin Ha

Personnel Manager

Marissa Carranza

Secretary

Mallorie Custodio

Clinic Address

First Congregational Church
3504 Mission Inn Ave.
Riverside, CA 92501

Mailing Address

3755 Lemon St.
Riverside, CA 92501

Phone Number

(951) 867-7742

Fax

1 (888) 519-4255

Email

secretary@riversidesrhc.com

Website

www.riversidesrhc.com

Pharmacy RFC Application				
First Name:	Last Name:	Age:	Email Address:	
Date of Birth:	Phone #:	Major(s):	Year in College:	GPA:
Have you ever been convicted of a crime? Yes ____ No ____ If yes, explain:				
A volunteer is expected to arrive by 5:00pm to set up and stay until the end of clinic (between 10:00-10:30 pm). Are you willing and able to attend these hours? Yes ____ No ____				
Are you available to volunteer in the summer? Yes ____ No ____				
Are you interested in taking BMSC 097? Yes ____ No ____ This is a voluntary component of RFC. The course is scheduled to start in Fall 2015. It will be a 2 unit, 10 week, Pass/No Pass course. (see attached for details)				
Directions: Please email completed applications to A completed pharmacy application includes: <ol style="list-style-type: none"> 1. Completed application form 2. CV or resume (no more than 2 pages) 3. A maximum 300 word essay stating 1) your interest in volunteering with RFC (i.e. what do you plan to get out of your volunteer experience and what can you offer to the clinic as a volunteer), 2) How many hours would you be able to commit per quarter if selected to volunteer and 3) any other pertinent information. 4. A completed referral form emailed directly from the referrer to Amanda Golay at agolay@llu.edu no later than Monday, May 11th at 11:59pm 5. Submitted application to agolay@llu.edu no later than Monday, May 11th at 11:59pm as a single PDF under the following file name: <ul style="list-style-type: none"> o Applicant last name.Applicant first name.RFCApplication.pdf o Ex) Ha.Kevin.RFCApplication.pdf <p>*Note: Pharmacy applicants do not have to meet or fill the other requirements and forms found in the medical volunteer application.</p>				
Applications and referral forms will be accepted NO LATER than Monday, May 11, 2015 at 11:59 p.m.				
Thank you for your interest in the UCR Riverside Free Clinic. We look forward to reviewing your application. Please remember that spots are limited. You will be notified of your acceptance as soon as possible upon completion of the application process.				