The 2018 The University of Arizona College of Medicine Summer Institute On Medical Ignorance

HIGH SCHOOL STUDENT RESEARCH PROGRAM

The NIH High School Student Research Programs offer positions in productive basic and clinical research laboratories at the University of Arizona College of Medicine (Arizona Health Sciences Center). Students who are **financially**, **educationally**, **and/or socially disadvantaged** are paid the minimum federal hourly wage for 40 hours a week for the duration of the program. As in previous years, 20-25 high school students will be incorporated into the Medical Student Research Fellowship Summer Program, thereby stimulating interactions with "big brother" and "big sister" medical students and also with medical faculty mentors and Visiting Professors conducting bi-weekly research seminars throughout the summer. Our hope and expectation is to attract the best and brightest disadvantaged students to the University of Arizona as undergraduates where some will continue their research and ultimately enter the College of Medicine and other professional and graduate programs.

The Review Committee will consider high school students (particularly juniors) with 3.0 (B) or better cumulative GPAs, *two outstanding letters of recommendation* from their science teachers, guidance counselors, and/ or principals, and additional evidence of research experience or inventiveness, such as science fair exhibits. A *one-to-two-page essay* on **"Why I love science and what the summer medical research apprenticeship will mean to me"** should be attached to the enclosed application form. In addition, students will need to provide *summary information justifying their financially, educationally, and/or socially disadvantaged status.* **Applicants must be U.S. citizens or have a permanent Visa AND have a Social Security Number.**

The application deadline is Monday, January 22, 2018.

Our Review Committee will screen applications and will invite semi-finalists for **interviews on Saturday, February 17, 2018 (Tucson campus).** Students will be notified of interview results within 2 weeks.

At the conclusion of the summer, all participants will deliver a brief oral presentation about their research in a special seminar and will submit a three-to-four page summary report of their progress.

The 2018 summer program **begins Monday, June 4, 2018 and ends Friday, July 20, 2018.** Students are expected to work full-time (Mon.-Fri., 40 hrs. a week) for the entire period. No attendance exceptions will be made, and a fellowship will be terminated automatically if days are missed for reasons other than unexpected illness or death of a family member.

Program Director:

Marlys H. Witte, MD, Professor of Surgery

Collaborating Directors:

Frank Porreca, PhD Professor, Pharmacology Fayez K. Ghishan, MD Professor & Department Head, Pediatrics

Mutimedia Collaboratory Producer: Peter Crown, PhD

Curriculum Coordinator: Michael Bernas, MS Program Manager: Grace Wagner Mentors: AHSC faculty

SPONSORS:

NIH OD R25 OD010487 TRANSLATING TRANSLATION & SCIENTIFIC QUESTIONING IN THE GLOBAL K-12 COMMUNITY

NIH NINDS R25NS076437 High School Student NeuroResearch Program (HSNRP)

NIH NICHD R25HDD8D811 Summers in Children's Research For Diverse High School Students

DO RESEARCH AND GET PAID TO LEARN.

WORK WITH PHYSICIANS AND BIOMEDICAL SCIENTISTS ON THEIR RESEARCH AND EXPLORE HEALTH CAREERS AT THE UNIVERSITY OF ARIZONA COLLEGE OF MEDICINE. GET PAID ~\$2,750 THIS SUMMER FOR LEARNING SCIENCE.

WHD:

THIS SUMMER PROGRAM TARGETS STUDENTS WHO ARE FINANCIALLY, EDUCATIONALLY, AND/OR SOCIALLY DISADVANTAGED.

WHEN: June 4 – July 20, 2018

WHERE:

THE UNIVERSITY OF ARIZONA College of Medicine (Tucson Campus)

APPLICATION

DEADLINE: Monday, January 22, 2018

For More Information:

CALL (520) 626-6360 grace@surgery.arizona.edu www.ignorance.medicine.arizona.edu



The **2018** Summer Institute ^{On} Medical Ignorance

APPLICATION FORM



NIH OD R25 OD010487 TRANSLATING TRANSLATION & SCIENTIFIC QUESTIONING IN THE GLOBAL K-12 COMMUNITY NIH NINDS R25NS076437 HIGH SCHOOL STUDENT NEURORESEARCH PROGRAM (HSNRP) NIH NICHD R25HD080811 SUMMERS IN CHILDREN'S RESEARCH FOR DIVERSE HIGH SCHOOL STUDENTS

HIGH SCHOOL STUDENT RESEARCH PROGRAM

TYPE OR PRINT LEGIBLY IN BLACK INK (Please complete ALL blanks).

Date of Birth	Check one: 🗖 Male 📮 Female
State	Zip Code
Cell Phone	
Soc. Sec. No	
District	
GPA (Cumulative)	
	sian 🗔 Black, not of Hispanic origin ain)
	State Cell Phone Soc. Sec. No District GPA (Cumulative) (tribal affiliation) A hic origin Other (expla

Previous research ideas, science exhibits, or other special talents (one additional page may be attached):

Checklist of required information to complete application is on page two of application.

APPLICATION DEADLINE: MONDAY, JANUARY 22, 2018

All application materials should be mailed to: Grace S. Wagner, Program Manager Student Research Programs, The University of Arizona Health Sciences Center, Room 4402K Department of Surgery, P.O. Box 245200, Tucson, AZ 85724-5200

Phone: (520) 626-6360 Fax: (520) 626-0822 E-mail: grace@surgery.arizona.edu Web: www.ignorance.medicine.arizona.edu

APPLICATION CHECKLIST

The 2018 The University of Arizona Summer Institute On Medical Ignorance

NIH OD R25 OD010487 TRANSLATING TRANSLATION & SCIENTIFIC QUESTIONING IN THE GLOBAL K-12 COMMUNITY

NIH NINDS 1R25NS076437 HIGH SCHOOL STUDENT NEURORESEARCH PROGRAM (HSNRP) NIH NICHD R25HD080811

SUMMERS IN CHILDREN'S RESEARCH FOR DIVERSE HIGH SCHOOL STUDENTS

HIGH SCHOOL STUDENT RESEARCH PROGRAM

Checklist of Required Information to Complete Application:

- □ Completed application form *(application page 1)*
- □ Your personal statement of disadvantaged status (application page 3)
- □ A one-to-two page student essay (typed double-spaced or legibly written in black ink) on the following inclusive topic: **"Why I love science and what a summer medical research apprenticeship will mean to me."**
- □ Two letters of recommendation from high school science teachers, guidance counselor, and/or principal (one letter **MUST** be from science teacher)
- □ An official copy of your high school transcript (must be signed and validated with school seal")
- □ Applicant release form (application page 4)

Note: Incomplete application packets will not be evaluated by Review Committee.

Optional supplementary materials:

□ Supporting documentation of your disadvantaged status, if available

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Phone: (520) 626-6360 Fax: (520) 626-0822 E-mail: grace@surgery.arizona.edu Web: www.ignorance.medicine.arizona.edu

DISADVANTAGED STATUS



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Personal Statement of Disadvantaged Status

(Required of **ALL** applicants)

Please provide a personal statement describing why you believe you are at a disadvantage in comparison with your peers, and check all boxes that describe your disadvantaged status.

□ Financially (for example, free or reduced lunch, low income, single-parent household, etc.)

Educationally (*for example,* rural community, limited availability of resources, etc.)

□ Socially (for example, first generation to go to college, English as a second language, etc.)

TYPE or PRINT LEGIBLY in BLACK INK.

One additional double-spaced page may be added.

(If available, please also submit supporting documentation of your disadvantaged status.)

APPLICANT RELEASE FORM



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APPLICANT RELEASE FORM

I understand that the NIH NCRR Translating Translation and Scientific Questioning in the Global K-12 Community, under the auspices of The University of Arizona College of Medicine, Medical Student Research Program, DOES NOT provide transportation to and from The University of Arizona for program participants. Limited housing is available for out of town students. I also understand that if my son/daughter is selected as a participant in this program, I will be held totally responsible for his/her actions and physical well-being outside of normal work hours for the duration of this apprenticeship program.

Signature of Parent and/or Guardian

Date

TYPE OR PRINT LEGIBLY IN BLACK INK

Out of Town Students ONLY (please check one

□ Local housing will be required □ Local housing will NOT be required If local housing is NOT required, please provide the Tucson address and phone number where the student will reside:

Tucson Phone Number: _____