The 2020 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 Card.

The application deadline is Friday, January 24, 2020. Our Review Committee will screen applications and will invite semi-finalists for interviews on Saturday, February 15, 2020 (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 2020 summer program **begins Monday**, **June 8**, **2020 and ends Friday**, **July 24**, **2020.** 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 **Curriculum Coordinator:**

Debbie Mustacich, PhD

Program Manager: Grace S. Wagner

Videographer: Juan Ruiz Mentors: AHSC faculty

Sponsors:

NIH NINDS R25NS076437

High School Student NeuroResearch Program (HSNRP)

NIH NICHD R25HD080811

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 minimum wage this summer for learning science.

Who:

This summer program targets students who are financially, educationally, and/or socially disadvantaged.

When:

June 8-July 24, 2020

Where:

The University of Arizona College of Medicine (Tucson Campus)

Application Deadline:

Friday, January 24, 2020

For More Information:

Call (520)626-6360

grace@surgery.arizona.edu www.ignorance.medicine.arizona.edu



The **2020** Summer Institute ^{On} Medical Ignorance

APPLICATION F D R M

The 2020 University of Arizona College of Medicial Summer Institute On Medical Ignorance

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

Name	Dat	te of Birth	Check one: 🗆 Male 🖫 Female	
Mailing Address				
City	County	State	Zip Code	
Home Phone	Ce	ell Phone		
E-mail (please print)	Soc. Sec. #			
School		District		
Graduation Year				
Ethnic Status:	 □ Alaskan Native □ Amer. Indian (tribal affiliation) □ Asian □ Black, not of Hispanic origin □ Hispanic □ Pacific Islander □ White, not of Hispanic origin □ Other (explain 			
Citizenship Status:	What country are you a citizen of? U.S. Citizen or Non-citizen National OR Permanent Resident of U.S. OR Non U.S. Citizen			
Career Goals (one addit	ional page may be att	tached):		
Previous research ideas,		-	ents (one additional page	

APPLICATION CHECKLIST



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)
☐ Supporting documentation of your disadvantaged status, if available
Note: Incomplete application packets will not be evaluated by Review Committee.
ORIGINALS MUST BE MAILED (POSTMARKED) NO LATER THAN FRIDAY JANUARY 24, 2020

- SCANNED/XEROXED/E-MAILED APPLICATIONS NOT ACCEPTABLE

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

APPLICATION DEADLINE: FRIDAY, JANUARY 24, 2020

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

DISADVANTAGED STATUS



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

Are you disabled?NoYes (If yes, please explain)
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 (<i>for example</i> , free or reduced lunch, low income, single-parent household, etc.) Number of dependents supported by parents/guardians:
☐ Educationally (<i>for example,</i> rural community, limited availability of resources, etc.)
☐ Socially (for example, first generation to go to college, English as a second language, etc.) Highest level of education attained by parents/guardians:
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



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

APPLICANT RELEASE FORM

I understand that the The University of Arizona College of Medicine 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 Guard	dian Date
Out of Town Students	s ONLY (please check one)
☐ Local Housing is required	☐ Local Housing is NOT REQUIRED
If local housing is NOT required, phone number where the student	please provide the Tucson address and twill reside:
Tucson Phone Number:	

TYPE OR PRINT LEGIBLY IN BLACK INK