The 2026 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 hourly wage for 40 hours a week for the duration of the program. As in previous years, 15-20 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 all current high school students (particularly current juniors and seniors) with 3.0 (B) or better cumulative GPA, two outstanding letters of recommendation with at least one from their science and or health related subject teachers, and additional evidence of research interest and inquisitiveness. Please disclose any previous experience in lab research. We will not accept unsigned letters of recommendation. 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 16, 2026 Our Review Committee will screen applications and will invite semi-finalists for group interviews on Saturday, February 14, 2026 (via zoom). Students will be notified of interview results within 3-4 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 2026 summer program begins Monday, June 1, 2026, and ends Friday, July 17, 2026. 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, Pediatrics and Neurosurgery

Collaborating Directors:

Frank Porreca, PhD, Professor, Pharmacology

Program Manager:
Neal Barnett
Curriculum
Coordinator: Mitchell
Bartlett, PhD Mentors:

AHSC

Sponsors:

NIH NINDS R25NS076437

High School Student NeuroResearch Program (HSNRP)

HOWARD V. MOORE

Community Foundation Grant

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 high school students who are financially, educationally, and/or socially disadvantaged.

When:

June 1-July 17, 2026

Where:

The University of Arizona College of Medicine (Tucson Campus)

Application Deadline:

Friday, January 16, 2026

For More Information:

Call (520) 626-0861

MSRP@surgery.arizona.edu www.ignorance.medicine.arizona.ed u



The **2026**Summer Institute
On Medical Ignorance

APPLICATION CHECKLIST

The 2026 University of Arizona College of Medicine Summer Institute On Medical Ignorance

NIH NINDS 1R25NS076437 High School Student NeuroResearch Program (HSNRP)

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Checklist of Required Information to Complete Application:

Completed application form (starts with application page 1) only include personal email addresse
Your personal statement of disadvantaged status (application page 3)
A one-to-two page student essay (on pages provided) on the following inclusive topic: "Why I love science and or health subjects and what a summer medical research apprenticeship will mean to me."
Two letters of recommendation with at least one from a high school science teachers and or health related subject teachers UNSIGNED LETTERS OF RECOMMENDATION WILL NOT BE ACCEPTED . 2nd letter can be from another teacher, administrator, or counselor.
An official copy of your high school transcript signed by a school official
Applicant release form (application page 7)
APPLICATION DEADLINE: FRIDAY, JANUARY 16, 2026

Submit your application by:

- 1. Emailing the application to MSRP@SURGERY.ARIZONA.EDU OR
- 2. Mailing/dropping off the application in person to Neal Barnett, Program Manager Student Research Programs, University of Arizona College of Medicine, Room 4402K Department of Surgery, P.O. Box 245200, Tucson, AZ 85724-5200

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

Phone: (520) 626-6118 E-mail: MSRP@surgery.arizona.edu Web: www.ignorance.medicine.arizona.edu

APPLICATION FORM

The 2026 University of Arizona College of Medicine Summer Institute On Medical Ignorance

NIH NINDS R25NS076437

High School Student NeuroResearch Program (HSNRP)

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High School Student Research Program

Name	Dat	e of BirthC	heck one: 🗖 Male 🗖 Fer	
Mailing Address				
City	County	State	Zip Code	
Home Phone		Cell Phone		
Your Personal Email		Social Security Nu	ımber	
School		District		
Graduation Year		GPA (Cumulative)		
Ethnic Status:	□ Alaskan Nati	NO.		
Ethnic Status:				
	☐ Asian ☐ Black, not of Hispanic origin			
	☐ Hispanic	rispanic origin		
	☐ Hispanic☐ Pacific Island			
		Hispanic origin		
	■ Other (explain			
Citizenship Status:	What country are	e you a citizen of?		
	☐ U.S. Citizen o OR	r Non-citizen Nationa	al	
	☐ Permanent Re	esident of U.S.		
	OR			
	☐ Non U.S. Citiz	zen		
Career Goals (one additi	onal page may be attac	ched):		
, 		,		
		• `	one additional page may	
ho attached).				

Career Goals (continued from page 1):				
Previous rese	arch (continu	ed from paş	ge 1):	

DISAD VANTAGED STATUS

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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: Parent(s) occupation(s):
☐ Other (please explain in detail and provide proof if possible):
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.)

Personal Statement of Disadvantaged Status (continued from page 3):

Why I love science and or medicine and what a summer medical research apprenticeship would mean to me		

Why I love science and or medicine and what a summer medical research apprenticeship would mean to me (continued)		

APPLICANT RELEASE FORM

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APPLICANT RELEASE FORM

I understand that the University of Arizona College of Medicine Student Research Program DOES NOT provide transportation to and from the University of Arizona for program participants. I also understand that if my child is selected as a participant in this program, I will be held totally responsible for their actions and physical well-being outside of normal work hours for the duration of this program.

Signature of Parent and/or Guardian	Date
Please provide your Tucson area address and phone tudent will reside during the duration of the progra	

TYPE OR PRINT LEGIBLY IN BLACK INK