



Instructions for completing this application are on page 3.

Last name:		First Name:		MI:
Ethnicity:		Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Transgender		
Citizenship:		If not a U.S. citizen, are you a permanent resident? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Present Mailing Address: Street				
City		State	Zip	
Permanent Mailing Address: Street				
City		State	Zip	
Institution E-mail Address:				
Permanent Email Address				
Primary Contact Phone #				
Alternate Phone #				
Permanent Phone #				
<b>EDUCATION</b>		Years of college credit completed		
College or University: (List all institutions attended)		Years:	Field of Study/ Major:	Graduation Date: (Expected)

**SELECT TRACK OF INTEREST** (please select ONE track of interest)

OHSU <a href="#">Graduate Studies (PHD)</a>	<input type="checkbox"/>
OHSU <a href="#">School of Medicine (MD)</a>	<input type="checkbox"/>
OHSU <a href="#">School of Dentistry (DMD)</a>	<input type="checkbox"/>

**GRADE POINT AVERAGE (GPA)**

Overall GPA	
Science GPA	

**LIST BIOLOGY & CHEMISTRY COURSES TAKEN & GRADES RECEIVED**


**BACKGROUND**

Is English your second language?		<input type="checkbox"/> No <input type="checkbox"/> Yes If “yes,” what was the primary language spoken in your home as a child?				
Please check the highest education level completed by your:	Unknown	Grade School	High School	Jr. College / Technical	College BA / BS	Graduate / Professional
Father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Father’s parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother’s parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have any of your siblings graduated from college? <input type="checkbox"/> No <input type="checkbox"/> Yes						
Check size of the principal city or town you grew up in (≤ age 18).				During what grades did you live there?		
<input type="checkbox"/> Urban Environment (>1,000,000 population)						
<input type="checkbox"/> Large City (100,000 to 1,000,000 population)						
<input type="checkbox"/> Mid-Size City (50,000 to 99,999 population)						
<input type="checkbox"/> Large Town (10,000 to 49,999 population)						
<input type="checkbox"/> Small Town (2,500 to 9,999 population)						
<input type="checkbox"/> Isolated Rural (<2,500 population)						

Limited support may be available for housing assistance. Please check all that apply:	<input type="checkbox"/> I would need housing during the program. I do not have housing in Portland. <input type="checkbox"/> I have housing in or near Portland. I will not need housing. <input type="checkbox"/> I have other needs / concerns as follow:
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**RESEARCH EXPERIENCE AND CAREER PLANS**

Have you had any research experience? If so, outline briefly.	<input type="checkbox"/> No <input type="checkbox"/> Yes
List your areas of scientific research interest:	

**DISADVANTAGED STATUS**

While you were growing up, did you experience any of the following types of adversity?				
	None	Mild	Moderate	Severe
Economic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Educational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethnic/Cultural	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Number of dependents listed on Parents 2012 Federal Tax Form: \_\_\_\_\_

Family Adjusted Gross Income from 2012 Federal Tax Form: \_\_\_\_\_

## ESSAY QUESTIONS

Please respond to the following two essay questions. The responses should be type written and between 300-500 words each. **All applications must have this information.**

- Please attach a separate sheet in which you describe your career goals and explain how this internship would further these goals. Talk about any research that you have done, and tell us if you have any particular area of interest for your summer research project. The more explicit you are with your research interests the better we can match you with a mentor.
- Please attach a separate sheet in which you describe any disadvantage you have faced in your past and how this has impacted your educational and/or career goals.

## PROGRAM DATES

I will be available for this program from **June 17 – August 9**

*Oregon Health & Science University (OHSU) reserves the right to track interns accepted in the Equity Summer Research Program to support research on student retention.*

If accepted into the Equity Summer Research Program, I agree to contact the Equity Coordinator yearly at the end of winter term/semester to report my academic goals and progress.

**I certify that the information given in this application is true and correct. I agree to all the terms and conditions set forth. I understand that submission of inaccurate information is sufficient cause for denial of admission or termination of enrollment.**

Signature \_\_\_\_\_

**INSTRUCTIONS:** Please type and fill out the application form completely. Return to the address at the bottom of the application.

## CHECKLIST FOR COMPLETION

1.  Completed Application with a signature.
2.  Two letters of recommendation from people who know you professionally. You must use the [Recommendation Form](#) and follow the instructions on the form. One of the letters **must** be from a college science teacher).
  - a. (Instructor's name, email, telephone)
  - b. (Recommender's name, email, telephone)
3.  Official college transcripts from all colleges and universities attended.
4.  Two Essay questions: Career Goals and Disadvantaged statements enclosed
5.  Resume or Curriculum Vitae
  
6. All materials must be sealed in one envelope or package. If the envelope does not contain all required material the application is incomplete and separate material will not be accepted.

For Questions: Please visit our Frequently Asked Questions (FAQ) page at [www.ohsu.edu/diversity](http://www.ohsu.edu/diversity) or email [cdi@ohsu.edu](mailto:cdi@ohsu.edu)

**All materials must be RECEIVED in ONE packet  
by: 4:00 p.m., Friday, March 22, 2013,  
to the Center for Diversity & Inclusion Office.**

**Completed applications should be sealed in one packet with required documents and mailed to:**

Ebony Lawrence  
Outreach and Recruitment Coordinator  
Center for Diversity & Multicultural Affairs, L-601  
3181 SW Sam Jackson Park Road  
Portland, Oregon 97239

Telephone: 503-494-5025  
Fax: 503-494-4916  
Email: [lawreneb@ohsu.edu](mailto:lawreneb@ohsu.edu)

**Summer Equity Research Program [Website](#)**

**The Equity Summer Research Program is proudly sponsored by the following Centers and Departments:**

[Portland Alcohol Research Center \(PARC\)](#)

[Center for Diversity and Inclusion \(CDI\)](#)

[OHSU School of Medicine Graduate Studies \(PHD\)](#)

[OHSU School of Dentistry \(DMD\)](#)

[OHSU School of Medicine \(MD\)](#)