



Summer Research Experience 2019 Application Deadline: February 28, 2019

Application Checklist

Applicant Name: _____

- Application (please type or print neatly)
- Two letters of recommendation (see instructions below)
- Statement of purpose, research Interest (see instructions below)
- Signature of faculty mentor (if applicable)
- Transcripts (unofficial copies acceptable)

I understand that space in the GUIDE Summer Research Program is limited, and that I must provide all required documentation before the deadline to be considered for acceptance. I certify that all of the information above is true and accurate to the best of my knowledge.

Applicant's Signature: _____

Date: _____

Funding for the GUIDE Project is provided by NIH/NCI Award #1P20CA202908-04. This summer fellowship is designed to help increase the participation of underrepresented groups in research careers. Information collected in the application is used to report aggregate information regarding the socioeconomic, racial and ethnic demographic characteristics of our participants. It may also be used to direct applicants to opportunities that are designed for particular racial and ethnic groups.

CONTACT FOR QUESTIONS ABOUT THIS APPLICATION:

Kathleen Gustafson
Program Administrative Assistant
GUIDE Project
Governors State University
Office: (708) 534-4987
Fax: (708) 534-4113
kgustafson@govst.edu

Last Name		First Name		Middle Name	
Date of Birth (mm/dd/yyyy)		Gender M F	GSU ID Number	<input type="checkbox"/> Freshman <input type="checkbox"/> Junior	<input type="checkbox"/> Sophomore <input type="checkbox"/> Senior
Current /Mailing Address					
Number & Street					
Apartment					
City					
State					
Zip Code					
Home Telephone Number					
Permanent Address					
Number & Street					
Apartment					
City					
State					
Zip Code					
E-Mail Address					
Demographic Information <i>Please check all that apply</i>					
<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Asian			<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Other _____		

Undergraduate Education			
Major		Overall Grade Point Average (4.0 scale)	
Degree Sought		Anticipated Graduation Date (mm/yyyy)	
Previous Institution(s) and degrees			
List any graduate entrance exams (GRE, MCAT, etc.) you have taken and your scores.	Exam	Score	
Will you be the first person of your immediate family to graduate from a four year institution? (circle one) Yes No			
Academic Advisor	Credit Earned Hours earned toward undergraduate degree:	Are you in the Honors Program? Yes No	

Please list and describe courses taken that support your research interests.		
Title of Course	Description	Grade Received

Circle the post baccalaureate degrees that interest you.
Master's Ph.D. M.D./Ph.D. Other: _____

Research Interests
List Below, at least two research topics/projects in which you are interested:
1.
2.
3.

How did you hear about the GUIDE Summer Research Program		
<input type="checkbox"/> Department Posting	<input type="checkbox"/> GUIDE/UICC Website	<input type="checkbox"/> GSU Faculty/University Staff
<input type="checkbox"/> E-mail Posting	<input type="checkbox"/> Fellow classmate	<input type="checkbox"/> GUIDE Presentation
<input type="checkbox"/> Friends/Family	<input type="checkbox"/> Other (please explain) _____	

Instructions for Applicant Statement and Letters of Recommendation

In addition to the application, you must also submit a Statement of Purpose and a Letter of Recommendation from two academic faculty who know you.

Statement of Purpose and Research Interests (500 words)

Please explain your background and interests in participating in the summer research experience. Describe your educational and professional goals, and any experiences, including prior coursework and volunteer experiences, that are relevant to health science research.

Letters of Recommendation

Please provide your recommenders with the following statement.

Thank you for agreeing to write a letter of recommendation for the individual applying to the GUIDE Project Summer Research Experience. In this letter please mention by full name the applicant and comment on your relationship to this applicant, including the timeframe in which you have known him/her. Please discuss the student's interest in a health disparities related career/field, the student's ability to succeed in a rigorous research environment, and any specific qualities that make the student a good candidate for this program. Your letter must be **submitted via email to Kathleen Gustafson, kgustafson@govst.edu by February 28, 2019 at midnight.**