

Biomedical Science Careers Student Conference – April 3-4, 2020

Return Options for Completed Application

Academic Level (Please check one)

1. Mail in envelope provided to:
Biomedical Science Careers Program
c/o Harvard Medical School
164 Longwood Avenue, 2nd Floor
Boston, MA 02115-5818

- Postdoc (research and clinical)
PhD candidate
MD/PhD candidate
MD candidate
DMD/DDS candidate
PharmD candidate
Master's candidate

- Post-baccalaureate:
college graduation year
college you graduated from
College student
Community college student
High school student
Other (specify)

2. Scan and email to ahmed_azim@hms.harvard.edu

Please Print Clearly: Your Assigned Advisor will Receive a Copy of your Application

PART A - 2020

Name (Please print) First Middle Last

Date of Birth (Required) Social Security Number (LAST 4 DIGITS)

PLEASE CHECK YOUR PREFERRED MAILING ADDRESS

Current Permanent

Current Mailing Address Permanent Mailing Address
Street Apt Street Apt
City City
State Zip State Zip
Phone Phone

Important Please Fill Out Preferred E-mail Address

Secondary Email Address Cellular Phone
Current School/Institution
Date of Entry Expected Year of Graduation/Program Completion
Degree(s) Expected Major/Field of Study

From the list below, please write in the number and name corresponding to the academic disciplines which most closely match your primary and secondary areas of interest. Please only choose two.

Primary Interest # Secondary Interest #

- 1. anatomy 15. pre-engineering 29. science (biomedical)
2. biochemistry 16. engineering 30. science (computer, mathematical)
3. biology 17. engineering (biomedical) 31. science (environmental health)
4. biology (cellular) 18. genetics 32. science (social, behavioral)
5. biology (molecular) 19. pre-medicine 33. science (health)
6. biophysics 20. medicine 34. statistics/biometrics/biostatistics
7. biotechnology 21. nursing 35. veterinary science
8. chemistry 22. nutrition 36. zoology
9. pre-dentistry 23. pathology 37. health administration
10. dentistry 24. pharmacy 38. health policy
11. economics 25. pharmacology 39. forensics
12. education (health, science) 26. physics 40. occupational/physical therapy
13. education (math) 27. psychology 41. neuroscience
14. epidemiology 28. public health 42. other

If you have received any honors, awards, scholarships, fellowships or special recognitions, please list them.

Blank lines for listing honors, awards, scholarships, fellowships or special recognitions.

Name (Please print) _____

 School/Institution _____

PART B - 2020

1. Please list all high schools, colleges and graduate/professional schools you have previously attended, beginning with the most recent.

Name of School	Dates Attended	Major Field	Degree(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Briefly describe any extracurricular activities in which you have been or are now involved.

3. Please list any academic enrichment programs, clubs, etc. (e.g., after-school, Saturday, summer programs) in which you have participated or are currently participating.

4. Have you ever participated in or do you currently participate in any of the following programs? Please check the appropriate box for each program.

	Yes	No	Do not know
a. 1992 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. 1994 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. 1996 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. 1998 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. 2000 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. 2002 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. 2004 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. 2006 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. 2008 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. 2010 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. 2012 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. 2014 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. 2016 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. 2018 Biomedical Science Careers Student Conference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. BSCP Specialty Conference or Skills Workshops	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. New England Science Symposium	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. HMS Explorations and/or Reflection in Action (RIA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. HMS Hinton Scholars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. HMS Project Success	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t. HMS Summer Clinical Translational Research Program (SCTRP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
u. HMS Visiting Research Internship Program (VRIP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

***** ONLY if you have previously attended a BSCP/HMS program, please complete the enclosed blue supplemental questionnaire.*****

5. Have you ever participated in any of the following types of science program? Please check the appropriate box for each.

	Yes	No	Do not know	If "YES" - Name of Program
a. non-degree science education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. non-degree science research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. science work-study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. science internship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. science fellowship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. science career planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
g. science mentoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
h. science counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i. science volunteer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
j. science enrichment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

6. Briefly describe any special interests you may have.

	Yes	No	Do not know
7. Do you <u>currently</u> have an advisor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Do you <u>currently</u> have a mentor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name (Please print) _____
First Last
School/Institution _____

PART B (continued)

9. Which three words would best describe the role you would like a mentor to play in your career development?

1. _____ 2. _____ 3. _____

10. At what age did you become interested in science? _____

11. Have you ever been discouraged from pursuing any of the following? Please check the appropriate box for each topic.

	Yes	No	Do not know
a. college-level studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. advanced graduate studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. career in science or engineering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. career in general	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. In your current school setting, has anyone discussed with you any of the following topics? Please check the appropriate box for each.

	Yes	No	Do not know
a. your professional goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. research traineeships, awards for minorities available to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. participation in any research projects outside of class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. science internship or fellowship opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. biomedical sciences career opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. the possibility of pursuing an academic/research career	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. the importance of networking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. the purpose of having a mentor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. membership in professional organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. With regard to your career, what do you see yourself doing five (5) years from now?

14. With regard to your career, what do you see yourself doing ten (10) years from now?

15. Describe three (3) talents or skills that have made you successful in your academic career.

PART C - 2020

16. How did you hear about the Biomedical Science Careers Program (BSCP)? Circle all that apply.

- | | | |
|--|------------------------------|----------------------------|
| a. BSCP website | e. summer program | i. fellow student |
| b. BSCP newsletter | f. advisor | j. minority affairs office |
| c. dean's office | g. student organization | k. student affairs office |
| d. faculty member/teacher/guidance counselor | h. professional organization | l. other (specify) _____ |

17. Briefly describe what you would like to gain from your participation in the April 2020 conference sponsored by the Biomedical Science Careers Program. Also include any areas for discussion, topics you would like to see addressed or questions you would like to have answered.

Name (Please print) _____
First Last
School/Institution _____

PART C (continued)

Please answer the following three (3) optional questions: 18 - 19 - 20.

18. How do you identify your gender? a. Male b. Female c. Other (specify) _____

19. How do you identify your race/ethnicity?
a. American Indian/Alaska Native
1. Please specify name of enrolled or principal tribe _____
b. Asian - If yes, please circle all that apply.
1. Asian Indian 6. Korean
2. Cambodian 7. Pakistani
3. Chinese 8. Vietnamese
4. Filipino 9. Other (specify) _____
5. Japanese
c. Black or African American - If yes, please circle all that apply.
1. African American
2. Caribbean or West Indian
3. African (specify country) _____
4. Other (specify) _____
d. Native Hawaiian/Other Pacific Islander - If yes, please circle all that apply.
1. Guamanian or Chamorro
2. Native Hawaiian
3. Samoan
4. Other Pacific Islander (specify) _____
e. White
f. Multiple/Mixed (please list) _____
g. Other (specify) _____

20. Do you consider yourself to be Hispanic/Latino? a. Yes b. No
If yes, please circle all that apply.
1. Cuban 4. Puerto Rican
2. Dominican 5. South or Central American
3. Mexican/Mexican American/Chicano 6. Other (specify) _____

21. Please indicate the highest educational level attained by your parents.
Mother
 Some high school Some college Some graduate/professional school Do not know
 Completed high school Completed college Completed graduate/professional school Other (specify) _____
Father
 Some high school Some college Some graduate/professional school Do not know
 Completed high school Completed college Completed graduate/professional school Other (specify) _____

22. Is either one of your parents involved in a science/health-related profession? yes no

By signing this application, I (or my parent or guardian on my behalf) hereby:

(A) acknowledge(s) and understand(s) that Biomedical Science Careers Program, Inc. (BSCP) will retain the information in this application for its records, and that this information, about the applicant, including identifying information, will be used to match students with advisors, track students through their academic and professional careers, and for future promotional and other communications, such as the BSCP newsletter; (B) consent(s) to photographic, audio, video, or electronic images of the applicant to be used by BSCP for exhibition, public display, publication, news media story, video, audio, or other electronic media, such as the Internet, television, CDROM, or DVD; (C) release(s) BSCP, including each of its directors, officers, employees and agents, waive(s) all known and unknown claims against any of them, and agree(s) not to sue any of them on account of or in conjunction with any claims, causes of action, injuries, damage, cost of expenses arising out of the applicant's participation in the Conference, whether or not caused by the acts, omissions or other fault of the parties being released; and (D) acknowledge(s) and represent(s) that he or she has carefully reviewed this application, including the foregoing acknowledgement, consent, release, waiver and agreement not to sue and understand(s) what each of them mean, and that my/their signature below indicates that delivery of this application to BSCP is my/their free act and deed.

Student/Fellow Signature (**REQUIRED**) _____ Print Name _____ Date _____
(If applicant is less than 18 years of age)
Parent/Guardian Signature _____ Print Name _____ Date _____

****Application Deadline: February 4, 2020****
****High School Application Deadline: December 12, 2019****

If you have any questions, please contact the Biomedical Science Careers Program at hollie_desilva@hms.harvard.edu or 617.432.0552.