UAB-CORD
Student BioTeach 2006
Application Form

Instructions

To be eligible for participation, the applicant must:
• currently be a high school **freshman, sophomore or junior** (9th - 11th grade)
• have an interest in and a demonstrated aptitude for science
• commit to attending all sessions during the two weeks of the program

Choose the session(s) that you would like to attend, ranking them 1-3 according to preference. If you cannot participate in one of the sessions, note that below.

_____ June 12 – June 23, _____ June 26 – July 7, _____ July 10 – July 21

I cannot attend the session on ______________________

**Note:** For Juniors who have not taken BioTeach, you may apply for the first BioTeach session and the second ChemTeach session.

• Submit a **completed application packet** including (check to indicate completion):

  _____ 1 the following application form
  _____ 2. a current high school transcript
  _____ 3. a one-paragraph essay describing your personal and career interests and how BioTeach will help you reach your career goals
  _____ 4. request that two teachers fill out the Teacher Recommendation Form (these are to be sent directly to CORD by the teacher)

• The cost of the Student BioTeach course is $250. A few scholarships are available for students from groups that are underrepresented in the research community.

**All 4 parts of the application must be delivered or faxed to the address below by March 31, 2006.**

Summer Science Institute
UAB Center for Community OutReach Development
Community Health Services Building, room 503
933 19th Street South
Birmingham, Alabama 35294-2041

FAX: 205-934-5158
Finalists may be required to schedule an interview with the Summer Science Institute faculty during the first week of May.

BioTeach 2006 Application Form

Applicants Name: ________________________________ Date of Birth: ____________
Mailing Address: ________________________________ SS#: ______________________
City: ________________________________ State: __________ Zip Code: __________
Telephone Number: ______________ Race: ______________ Sex: ____________
Name of Parents/Guardians: ______________________________________________
Parents Mailing Address (if different) _______________________________________
______________________________________________________________________
What school will you attend next year? ______________________________

Are you a member of a group that is underrepresented in the research community? These groups currently include African-Americans, Hispanics, American Indians and Pacific Islanders. Yes_____ No______

List all courses that you have taken in the following areas along with the grades received, e.g., Freshman Biology A:

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<th>Science</th>
<th>Math</th>
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List school/community activities in which you are involved:

______________________________________________________________________
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List any scholastic or science awards or honors that you have received along with the year it was received:
______________________________________________________________________
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Do you have any allergies or medical conditions that would prohibit you from working in a research laboratory or clinical setting?  No: _________   Yes: __________
If yes, please explain: ____________________________________________________
______________________________________________________________________
______________________________________________________________________

Please indicate the area in which you have a career interest:
___ Biomedical Research (please note specific area of interest) ___________________
___ Health Related Profession (please specify) ________________________________
___ Science Education (specify area and level (e.g., HS Biology) __________________
___ Other (please specify) ________________________________________________

On a separate piece of paper in a single paragraph, please tell us what the following quote means to you.

From Albert Einstein, "We can't solve problems by using the same kind of thinking we used when we created them."

Be sure to complete all four parts of the application, including asking your references to send in the teacher recommendations to us by March 31, 2006.
I certify that the information contained in this application is correct and complete. I grant permission for information concerning my educational records to be released to UAB for the purpose of establishing eligibility to participate in this program.

_________________________________________  _____________________
(Applicant’s signature)                                                          (Date)

I/we approve of my/our child’s participation and will work with my/our child to insure that he/she actively participates in and fulfills all requirements of the UAB/CORD Summer Science Institute.

_________________________________________  _____________________
(Parent’s signature)                                                              (Date)

_________________________________________  _____________________
(Parent’s signature)                                                              (Date)

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