

UAB Surgery Undergraduate Research Experience (SURE)

Application Deadline: February 15, 2019, 5pm CST

Instructions: Type or print in black ink all information requested and return by February 15, 2019. The application must be uploaded through the program website. The complete application should include the requested attachments including: 1) resume 2) college transcript, 3) essay and 4) two letters of recommendation (submitted separately). Additional instructions on each of these attachments is included in the application below.

Submit applications via website: <https://www.uab.edu/medicine/surgery/SURE>

Name: _____
First MI Last

Primary Mailing Address: _____
Street Address

City State Zip **Phone:** _____

Email: _____ **Date of Birth:** _____
Mo/Day/Yr

Place of Birth: _____

Gender: ☐ Male ☐ Female

Racial Category: (check appropriate response)

- ☐ American Indian/Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White
- ☐ Other _____
- ☐ Do Not Wish to Provide

Ethnic Category: (check one)

- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino
- ☐ Do Not Wish to Provide

US Citizenship Status: (check one)

- ☐ US Citizen
- ☐ US Permanent Resident
- ☐ Other _____

School Information

High School(s) Attended:

Name of School	City	State	Years Attended
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College/University Currently Attending:

Name of School	City	State	Years Attended
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Year in College: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior

Current GPA: _____
On a 4.0 scale

Recommendation Information: Indicate the name of the two individuals you have asked to provide a recommendation for you. Please provide them with the form and instructions included on the website.

Name	Relationship to Applicant	Email/Phone Number
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Name	Relationship to Applicant	Email/Phone Number
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What career(s) are you most interested in? _____

Please indicate the type of research you are interested in:

☐ Basic Science ☐ Clinical/Outcomes ☐ No Preference

Applicant agreement: I certify that all information submitted in this application is true to the best of my knowledge. I understand that the UAB Department of Surgery Research Internship requires a full-time eight-week commitment. I acknowledge that this program is highly competitive and I will put forth the greatest level of effort and commitment to achieve the program requirements if selected for the program.

Signature of applicant: _____ Date _____

ATTACHMENTS

Resume

Attach a current resume that outlines past work, research and extracurricular activities

College Transcript

Attach a copy/scan of your official college transcript. If you have attended more than one college or university, please include more than one transcript. Reviewers will want to see your complete undergraduate academic history.

Essay:

In a maximum of 2-3 pages, single spaced, with 1" margins, 12 pt font, prepare an essay that addresses the following topics:

- Brief personal background
- Interest in the program
- Career interests
- Why you feel you are uniquely deserving of the opportunity above others
- Discuss an experience from your past that you feel demonstrates your greatest strengths

ADDITIONAL APPLICATION REQUIREMENT

Recommendation Letters:

Two recommendations are required to complete the application. The instructions for the letter are available on the program website and should be provided to the professors or other professionals that you ask to recommend you. Recommendations must be submitted through the program website.