2021 SUMMER STUDENT PRE-MED AND RESEARCH PROGRAM

Application Check list

☐ APPLICATION COMPLETED IN FULL
   (Please double check)

☐ APPLICATION FORM (CURRENT JUNIORS ONLY)
☐ ESSAY
☐ OFFICIAL TRANSCRIPT (may be sent from school)
☐ TWO CONFIDENTIAL LETTERS OF RECOMMENDATION FROM COLLEGE PROFESSORS OR MENTORS
   (Recommendation letters in sealed envelopes to be included in your application)
☐ 2X2 PASSPORT TYPE PHOTO OR DIGITAL PHOTO (PREFERABLE)

Application Submission

The complete application and supporting documents are to be submitted in one envelope to:

Rosemarie Portal, Director
Summer Student Pre-Med and Research Program
Department of Medical Education
Hartford Hospital
80 Seymour Street, Box 5037
Hartford, CT 06102-5037

- Complete applications MUST be received by February 5, 2021
- NO exceptions after February 5, 2021
- Incomplete applications will NOT be considered
2021 SUMMER STUDENT PRE-MED AND RESEARCH PROGRAM APPLICATION

Name__________________________________________ US Citizen or Permanent resident (please circle)

Soc. Sec. # (last four digits) ____________ Date of Birth _________________ E-Mail ____________________________

Present Address __________________________________________

School Phone __________________________ Cell Phone ____________________________________________

Home Address __________________________________________ Home Phone __________________________

Emergency Contact: ____________________________________ Emergency Contact Phone: ______________________

Present Status __________________________ Current 3rd Year Junior? □ Yes □ No

Name of College ____________________________

Major:________________________________________ Degree ____________ Year Received ____________

or Expected

If attended other colleges, list name, attendance dates & major: __________________________________________

Science courses completed or to be completed by end of current year: (official transcript MUST be submitted with Application)

Research experience: (nature of work, location, dates) __________________________________________

Non-academic experience: (on and off-campus activities, summer jobs, etc.) __________________________

Research investigation preference: (list three areas from program description) __________________________

Confidential Reference Letters: (requested by applicant from two professors or mentors and MUST be submitted with Application)

Reference: __________________________ Contact Email/Phone # __________________________

Reference: __________________________ Contact Email/Phone # __________________________

Applicant Statement: On one printed page state the reasons you wish to participate in this program and how this Program fits into your overall career plans.

Complete applications will be reviewed and qualified candidates will be invited for a phone interview. Deadline for complete applications is February 5, 2021. Interviews will be scheduled between February 8th - March 12, 2021.

Please return this application and supporting documents to:
Rosemarie Portal, Director
Summer Student Pre-Med and Research Program
Department of Medical Education
Hartford Hospital
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Attach Recent 2x2 photo
or Forward a Digital Photo (Preferable)