# MHIRT INTERNATIONAL RESEARCH INTERNSHIP, SUMMER 2020 APPLICATION FORM

Please also refer to the MHIRT Supplemental Program Information document for detailed information about eligibility criteria and internship site descriptions

Please submit all documents as ONE PDF FILE (except the letters of recommendation, which should come separately, and before the deadline!)

Priority Deadline: December 20, 2020 at 4:00pm CST Final Deadline: January 10, 2020 at 4:00 pm CST

Last Name	Fil	st Name			M.I.
Primary Phone number			Alternate Phone	e Number	
E-mail Address			Alternate E-mai	l Address	
Birth Date (MM/DD/YYYY)	') Gender Male	e Fem	ale	Student ID	number
Are you a US Citizen, No of the United States? (All	n-Citizen National, c	r Permanent Re	sident	Are you part of Biosciences A	of the lowa
Yes No				Yes	No
Ethnicity (All applicants m	nust choose one)				
African American	•	American/Alaska	n Hawai	iian/Pacific Isla	nder
Hispanic/Latino	Mixed		Cauca	asian	
Other					
My application is based or Program Information doc	0 0	•			1 1
Ethnicity	Low Income	Rural			
What is your current grad (MD, PharmD, etc)	e level? (Must be Ju	ınior, Senior, Gra	d Student, PhD	Candidate, or F	Professional
What is your current field	of study? (Must be	n the biomedica	, behavioral, clin	ical or social so	ciences)

What	is	vour	expected	d date	of	graduation?
vviiat	10	your	CAPCOLO	a date	Oi	gradadion.

What is your most current GPA? (Must be 3.0 or higher)

### **Current Contact Information**

Street Address Line 2

City State Zip Code

# Parent/Guardian or Permanent Residence Information (if different from above)

Street Address Line 2

City State Zip Code

# **Emergency Contact 1**

Last Name First Name Relationship to you

Secondary Phone

Primary Phone Number Number E-mail

# **Emergency Contact 2**

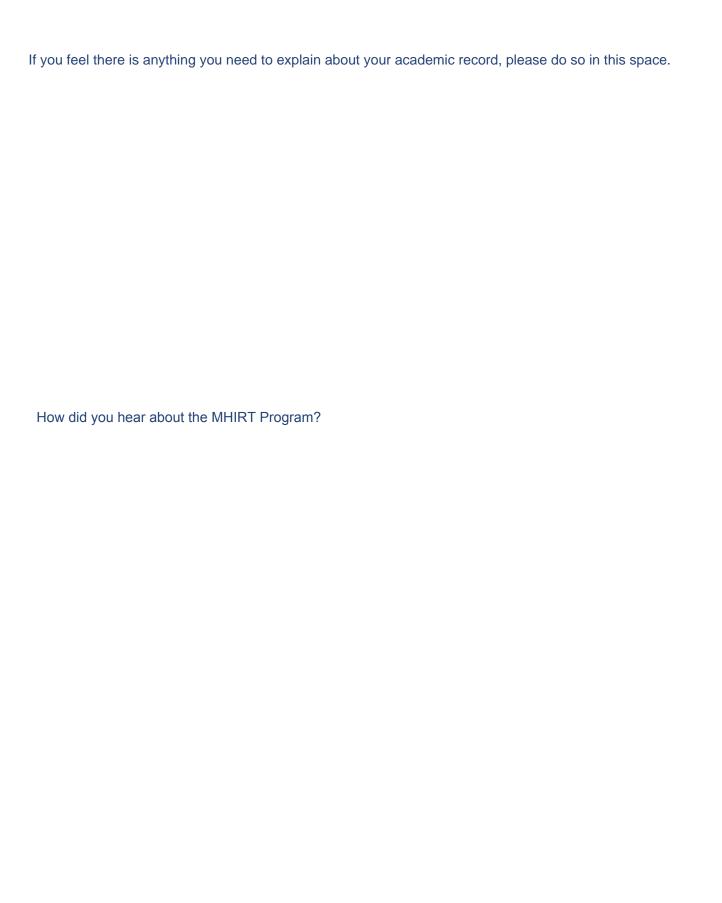
Last Name First Name Relationship to you

Secondary Phone

Primary Phone Number Number E-mail

Previous University/College/Institution 1 (Name and State)					
Degree	Field of Study	Year Awarded	GPA		
Previous University/Colle	ege/Institution 2 (Name and State)				
Degree	Field of Study	Year Awarded	GPA		
Previous University/College/Institution 3 (Name and State)					
Degree	Field of Study	Year Awarded	GPA		

Please list any of the following: Current medical conditions we should know about, such as medication allergies, food allergies, pregnancy, or chronic health concerns.



### **Internship Site Selection and Travel Information**

Do you have a passport?	If Yes, what is the date of expiration? (MM/DD/YYYY)
Yes	
No	
Please note that if you are selected, you	must immediately apply for a passport if you do not have one already.
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I am a graduate or professional student, and I have designed my own research projector practicum experience. Students who are selected under this option **must be able to agree to all the statements below**, and provide proof as documents attached to this application. Please check applicable boxes to show your acceptance of these conditions. (Skip if you are not a grad/medical/PhD student).

I have made the necessary contacts in Romania and can provide a letter of support from my already identified host country mentor which states they are aware I am coming and are willing to mentor me while in that country.

My research/practicum proposal is already developed and attached to this application.

I am aware that if I am working with human subjects, I must seek Institutional Review Board approval from both the host country and the University of Iowa.

I am aware that if I am doing this project as a practicum experience, I must confirm the details with my practicum advisor and abide by all rules pertaining to the practicum experience. I understand that I am responsible for the content of the practicum plan, and that MHIRT does not design my practicum experience for me.

Do you speak any other languages, besides English, and how well do you speak that/those language(s)?

**Internship Topics** Please choose your top three areas of interest: Adolescent Health Cancer Cardiovascular Diseases **Diabetes** Disability & Health **Environmental Health Food Safety Health Administration** Health Disparities and Access to Health Services Health Education/Community Based **Programs** Health Information and Technology **Health Policy Hearing Disorders HIV/AIDS Immunizations** Infectious Diseases (malaria, tuberculosis, etc) Injury Prevention (accidents, disaster prep, falls, road traffic safety, etc) Maternal, Infant & Child Health Mental Health & Mental Disorders **Nutrition** Occupational Safety \$ Health Physical Activity & Fitness Reproductive Health & Family Planning Respiratory Diseases **Sexually Transmitted Infections** Social Work Substance Abuse Tobacco Use Toxicology Water Sanitation Women's Health

Other

# Please attach the following documents to this application, and check the boxes to indicate what you have submitted:

1. Essay: Please address all of the following questions below in no more than 3 pages.

Why do you want to participate in this internship program?

If you are choosing a specific site, please state why you think this site will match your interests.

Do you have any previous research experience (working in a lab, collecting data, administering surveys)?

Please describe any other relevant work experience you may have (internships or other employment), or any awards or honors you have received. Please also describe any previous international trips.

What are your areas of interest in the health sciences? Please be as specific as possible, as the host country mentors will look at this essay to learn about your interests and experience, and match you to a research project based on what you say. Mentors also look at list of internship topics you chose.

What are your future academic and career goals, and how do you think the MHIRT internship will help you attain your goals?

#### 2. Two Letters of Recommendation

Please include 2 letters of recommendation, preferably from a health sciences instructor or supervisor, who can speak about your aptitude and experience. The letters should arrive directly from the author. Letters by snail mail, or E-mail, are ok.

### 3. Resume or CV

Please be sure this document is up to date and includes all academic and work experience, and lists any publications or presentations you may have done

### 4. Academic Transcripts

If from the University of Iowa, you may include copies of transcripts from MyUI (will be checked against student records by the MHIRT acceptance committee)

If from another school, must send originals in a sealed envelope

5.If you are not a US Citizen, please be prepared to show your <u>permanent resident card</u> to the committee if asked

You do not need to provide a copy at the time of application

### 6. Other documentation that may be needed:

For graduate students doing own research or practicum project, attach a copy of your proposal, letter from host country mentor, and letter from UI faculty mentor

For "Low Income" criteria applicants, please attach financial aid/loan documentation as proof of financial assistance received

For "Rural" criteria applicants, please print out of search results for verification of rural status

Send all application documents via email, fax or snail mail to:

Dr. Marek Mikulski MHIRT Coordinator 2213 Westlawn University of Iowa Iowa City, Iowa 52242

phone: 319-384-4296 fax: 319-353-5649 marek-mikulski@uiowa.edu

Please submit all documents as ONE PDF FILE, if possible (excepting letters of recommendation, which should come separately, and before the deadline!)

No applications will be accepted after 4:00 pm on January 10, 2020 (No exceptions!). Applications received by 4:00 pm on December 20th will be given priority review.

If you have any questions at any time about the application procedure, please do not hesitate to contact us at any time. Contact information is as follows:

Dr. Marek Mikulski, MHIRT Coordinator (see information above)

Dr. Rima Afifi
MHIRT Director
N422 CPHB
University of Iowa
Iowa City, Iowa 52242
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rema-afifi@uiowa.edu