

Summer 2023 High School student SEED/STEM Summer Research Program Application

Thank you for your interest in applying for 2023 SEED/STEM summer programs affiliated with the IUPUI campus and the IU School of Medicine. Please complete this application as accurately and honestly as you can.

Students currently in grades 10, 11 and 12 are prioritized. In some circumstances, students currently in 9th grade may be accepted.

The application has multiple parts/pages. You are able to save your work at any time and then return to it by clicking the 'Save and Return' button at the bottom.

There are two additional REQUIRED parts of the application:

- 1) A parent application
- 2) A recommendation from a teacher

You will receive an email (to your non-school email) when you complete this form with more information on these two additional steps. Links to both are found here: <https://indianactsi.org/researchers/education-training/k-12stem/>

All application material must be submitted by March 1, 2023. For questions, please email ctsipath@iupui.edu.

To preview the entire application, click here:

[Attachment: "Summer2023HighSchoolStudentSEE.pdf"]

Last Name. Please provide your last name as it appears on your social security card, or other similar official documents. If your last name is more than one word, please include it here with caps, or no caps the way it appears on your documents -example: de la Vega.

First and Middle Names. Please provide your first and middle names the way they appear on your social security card, or other similar official documents.

Personal Email. IMPORTANT: This is DIFFERENT than your school email. Make sure the email address you provide here is working for you. This is the email where you will receive the follow up information and status updates about your application as many school emails block outside messages.

(Personal email address where confirmations are sent)

Your personal email again to ensure accuracy.

(This helps ensure accuracy)

Please double check your personal email entries - they do NOT match

Phone number where you are best reached?

(###) ###-####

Name of Parent(s) or Guardian(s) that you live with.
If you have a shared custodial arrangement, please add
name/s of other custodial parents on the next
question.

(Custodial parent/s or legal guardian/s)

Name(s) of Additional Custodial Parents or Legal
Guardians with shared custody.

(Custodial parent/s or legal guardian/s)

Home Address. Enter your complete address here
including city, state and zip code

(address)

Best phone number where one of your parents can be
reached

If you need to take a break to get your parents email address, choose the 'Save & Return Later' option at the bottom
of this form. Please be sure to enter your email into the system so they can send you the form with your saved info.

Parent email. Please provide an email address for the
parent/guardian where you live who will complete the
parent portion of the application. Please enter
the correct email.

(If needed, help your parents create an email
account)

Parent email 2. If possible, provide an email address
for a second parent.

(If needed, help your parents create an email
account)

Which high school do you attend?

(Official School Name)

Expected Graduation Year

- ☐ 2023
☐ 2024
☐ 2025
☐ Other
(graduation year)

Please note: Students currently in grades 10, 11 or 12 are prioritized. In rare instances students who are currently in
9th grade may be accepted.

Date of Birth

(MM/DD/YYYY - month/day/year)

Gender

- ☐ Female
☐ Male
☐ Non-Binary
☐ Prefer not to answer

Race	<input type="radio"/> American Indian or Alaska Native <input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> Native Hawaiian or Pacific Islander <input type="radio"/> White <input type="radio"/> Multi-Racial <input type="radio"/> Unknown <input type="radio"/> Prefer not to answer (Choose most descriptive option)
Ethnicity	<input type="radio"/> Not Hispanic or Latino <input type="radio"/> Hispanic or Latino <input type="radio"/> Unknown <input type="radio"/> Prefer not to answer (Choose most descriptive option)
Are you a citizen of the United States?	<input type="radio"/> Yes <input type="radio"/> No
Are you a Permanent Resident of the United States with a Permanent Resident "Green Card" or USCIS Form I-551?	<input type="radio"/> Yes <input type="radio"/> No
Please describe and explain your citizen or immigration status. Please provide sufficient information for program directors to know how to best support you.	<hr/>
If accepted for the program, how will you travel to your internship location?	<input type="radio"/> I will drive my own/family vehicle <input type="radio"/> Someone else will drive me <input type="radio"/> I will walk, bike or take bus <input type="radio"/> Other
Please describe transportation plans	<hr/>
Some internship locations may require students to be fully vaccinated. Which option best describes your vaccination status?	<input type="radio"/> I am already vaccinated <input type="radio"/> I anticipated being vaccinated prior to April 1, 2023 <input type="radio"/> Other, please explain
Please provide details regarding vaccination status	<hr/>

Scientific and STEM related fields. Please express the level of interest you have for each field.
0=Not interested, 3= Somewhat Interested 5= Very interested

	0	1	2	3	4	5
Engineering	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chemistry	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Computer Science	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bio Informatics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Neuroscience	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oncology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pediatrics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Genetics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

About you

Math and Science. Discuss some of the math and science classes you have taken in school and what aspects you most enjoyed about those courses.

Chemistry. Please list specific all chemistry courses you have taken.

Computer Science. Describe any experience with programming/coding including courses and software used.

Statistics. Describe any experience with statistics including courses and software used.

Extracurricular Activities. What are the extracurricular activities have you participated in during your high school years? Please limit your answer to 250 words.

Jobs. List any jobs you have had, your responsibilities, and the time period(s) you had this job. If this is a current job, mention this also.

Awards, Honors, Grants, Special Academic / Research Activities. Please list all academic, athletic or community awards and honors or grants, and list any special academic or research experience not previously referenced that helps the committee understand your achievements to date.

Career Choices. What are your top 2 career choices? It is very common for students to change their mind about their future goals after being in college a year or two, but as of now, what are your top career choices?

Previous program experience. If you have participated in a research experience at IUPUI/IU School of Medicine in the past, please describe.

If accepted into the program, what would your first choice for area of research?

- ☐ Molecular and Cell Biology
- ☐ Biomedical Engineering (BME)
- ☐ Biochemistry, Chemistry & Forensics
- ☐ Physics & Bio-Physics
- ☐ Engineering and Materials Science
- ☐ Geology and Environmental Science
- ☐ Oncology - Breast Cancer
- ☐ Oncology - Obstetrics & Gynecology
- ☐ Oncology - Prostate & Testicular
- ☐ Neuroscience - Alzheimer's and Dementias
- ☐ Neuroscience - Parkinson's & ALS
- ☐ Neuroscience - Toxicology, Addictions & Substances Abuse
- ☐ Neuroscience - Mental Health
- ☐ Diabetes & Metabolic Diseases - Adult
- ☐ Diabetes & Metabolic Diseases - Pediatric
- ☐ Cardiology and Cardiac Developmental Research
- ☐ Hematology, Blood Cancers, and Stem Cells
- ☐ Asthma, Allergies & Pulmonary Diseases
- ☐ Infectious Diseases & Immunology
- ☐ Nephrology & Urology
- ☐ Gastro-enterology & hepatology
- ☐ Musculoskeletal Health, Sports Medicine and Orthopedics
- ☐ Otorhinolaryngology, Head & Neck Surgery
- ☐ Dentistry & Oral Health
- ☐ Public Health, Global Health & Epidemiology
- ☐ Bio-Informatics and Computational Biology
- ☐ Trauma Care and Emergency Medicine
- ☐ Pharmacology & Drug Development
- ☐ Other
- ☐ Unknown

If accepted into the program, what would your second choice for area of research?

- ☐ Molecular and Cell Biology
- ☐ Biomedical Engineering (BME)
- ☐ Biochemistry, Chemistry & Forensics
- ☐ Physics & Bio-Physics
- ☐ Engineering and Materials Science
- ☐ Geology and Environmental Science
- ☐ Oncology - Breast Cancer
- ☐ Oncology - Obstetrics & Gynecology
- ☐ Oncology - Prostate & Testicular
- ☐ Neuroscience - Alzheimer's and Dementias
- ☐ Neuroscience - Parkinson's & ALS
- ☐ Neuroscience - Toxicology, Addictions & Substances Abuse
- ☐ Neuroscience - Mental Health
- ☐ Diabetes & Metabolic Diseases - Adult
- ☐ Diabetes & Metabolic Diseases - Pediatric
- ☐ Cardiology and Cardiac Developmental Research
- ☐ Hematology, Blood Cancers, and Stem Cells
- ☐ Asthma, Allergies & Pulmonary Diseases
- ☐ Infectious Diseases & Immunology
- ☐ Nephrology & Urology
- ☐ Gastro-enterology & hepatology
- ☐ Musculoskeletal Health, Sports Medicine and Orthopedics
- ☐ Otorhinolaryngology, Head & Neck Surgery
- ☐ Dentistry & Oral Health
- ☐ Public Health, Global Health & Epidemiology
- ☐ Bio-Informatics and Computational Biology
- ☐ Trauma Care and Emergency Medicine
- ☐ Pharmacology & Drug Development
- ☐ Other
- ☐ Unknown

Personal Statement. Why are you most interested in participating in a summer research program. 250 words is sufficient.

GPA. What is your cumulative GPA (Grade Point Average) at this moment?

(numbers, not letters)

Which option best describes your school's GPA Scale.

- ☐ Traditional 1-4
- ☐ 1-4 with equal weight given to Honors, AP, and Dual Credit Courses
- ☐ 1-4 with weight given to Honors courses, and extra weight given to AP and Dual Credit Courses
- ☐ Other Grade Scale Type

Please explain the GPA Scale used at your school.

If there is any other information you would like for the committee to consider when evaluating your application, please include those notes here.

(Other Information Notes)

OPTIONAL. If you have a resume or any other document related to your accomplishments that you would like to upload, you may upload it here. This is NOT required, just optional.

OPTIONAL. If you have a copy of your academic transcript (grades), you can upload it here. (PDF format preferred). Although not required for the application, you may be asked to provide it prior to acceptance so we recommend you begin talking with your school about how to obtain a copy. Transcript does NOT need to be an 'official' version.

(upload transcript here)

Enter your name on this line to certify you have completed this form with accurate information.
