



# Medical Student Summer Research Internship Application 2010

## Louisiana State University Health Sciences Center School of Medicine

- Your completed application packet must include all of the following:
- A cover letter describing your research interests and career goals
- A completed application form
- A resume describing schools attended, previous job experience, and relevant accomplishments

### 1. Personal Information

Name: \_\_\_\_\_  
First
MI
Last

SSN: \_\_\_\_\_

Birth date: \_\_\_\_\_

Home address: \_\_\_\_\_  
 \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

### 2. Academic Information

Check your current academic level: \_\_\_\_\_Prematriculated \_\_\_L1 \_\_\_L2 \_\_\_Other

Overall GPA: \_\_\_\_\_

Have you ever received a Taylor Opportunity Program for Students (TOPS) award, are currently attending, or have attended the Patrick F. Taylor Science and Technology Academy?  
 \_\_\_\_\_(N)

\_\_\_\_\_ (Y) TOPS    \_\_\_\_\_ (Y) Patrick F. Taylor Academy

\_\_\_\_\_ Years of TOPS Received or Attendance of Academy

List laboratory experience, previous internships, and/or lab rotations (if any):

### 3. Research Interest Information

Rank the areas of research that you are interested in (1=most interest; 5= least interest) *\*\*you may list specific faculty labs if you have identified such*

_____ Neuroscience	_____ Immunology	_____ Vaccine Research
_____ Cell Biology	_____ Molecular Biology	_____ Cardiovascular Res.
_____ Immunology	_____ Microbiology	_____ Virology
_____ Cancer Research	_____ Gene Therapy	_____ clinical medicine
_____ Chemistry	_____ Pathology	_____ Pharmacology
_____ Biochemistry		

Other: \_\_\_\_\_

Faculty: \_\_\_\_\_

*Send or e-mail (as attachment) application packet to:*

*Dr. Paula Gregory [pgrego@lsuhsc.edu](mailto:pgrego@lsuhsc.edu)  
and Dr. Fern Tsien [fmille@lsuhsc.edu](mailto:fmille@lsuhsc.edu)*

*Dept. Genetics, LSUHSC*

*533 Bolivar Street, New Orleans, LA 70112*

*Phone: 504-568-6151*

*Fax: 504-568-8500*

**SCHOOL OF MEDICINE IN NEW ORLEANS**  
**LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER**  
**Medical Student Summer Research Fellowship 2010**  
**Program information**

The goal of this program is to give medical students the opportunity to perform research. A practicing physician must be able to evaluate research data and read research papers in order to properly judge modes of treatment for various diseases. It is the hope of the administrators of this program that participation will promote an understanding of how research is conducted and may help lead to better medical treatment for patients.

**A. DURATION**

The medical student must make a commitment to work in the lab of his/her mentor for 8 weeks, beginning June 1<sup>st</sup> and ending July 31<sup>st</sup>.

**B. QUALIFICATIONS**

An applicant must be registered at LSU School of Medicine in New Orleans and be in good standing. Upperclassmen in good standing are also qualified.

**C. METHOD OF APPLYING**

The application for a Summer Research Fellowship must be submitted on the attached forms. Your completed application packet must include all of the following:

- A cover letter describing your research interests and career goals
- A completed application form
- A curriculum vitae or resume describing schools attended, previous job experience, and relevant accomplishments

**D. DEADLINE FOR APPLICATION**

Prospective candidates must apply online. The application deadline is March 1st.

**E. STIPENDS**

The stipend for the participant is \$3000.00 for the 8 week period.

**F. DUAL SUPPORT**

A student receiving financial support for summer research from another foundation or scientific source, cannot receive additional support from this program.