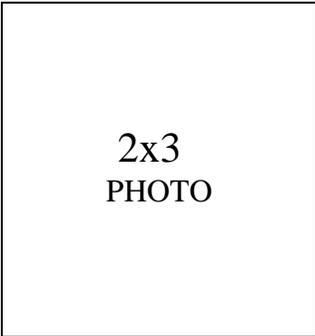




**EBSCO Scholars Program**  
**EBSCO Summer Research Internships**  
**For High School Students**  
**June 03 – July 26, 2024**



**2024 Application Form**

**Applicant Eligibility:**

- Currently a **Birmingham, Bessemer, Fairfield, Midfield**, high school Junior or Senior (in 11<sup>th</sup> or 12<sup>th</sup> grade).
- Overall GPA of 3.0 and 3.5 in STEM Courses.
- Have an interest in and a demonstrated aptitude for science.
- Commit to being present on all days of the Internship.
- Submit a COMPLETED APPLICATION PACKET which includes:
  1. Completed Application Form.
  2. High school Transcript (sent by your school).
  3. Two letters of recommendation, at least one from a science teacher.
  4. A one-page essay describing your personal and career interests.
  5. Passport size photo (headshot attached above required).
- Each Scholarship will pay **\$2,500** to Interns who successfully complete the program. There is no tuition fee for the Internship.

**\*Deadline for Application: 5:00 p.m. Tuesday, March 12, 2024\***

**All applications must be received in one complete package at the same time.  
It is understandable that your school may mail your Transcript.**

Please **Mail or Deliver** Applications to the CORD Office. **Faxed or emailed** forms will not be accepted.

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**EBSCO SUMMER RESEARCH INTERNSHIPS**  
**For High School Students**  
**Community Health Services Building, Room 503**  
**933 19th Street South**  
**Birmingham, Alabama 35294-2041**

- Finalists may be required to schedule an interview with the CORD Staff at UAB.
- Students not qualifying for a specific program may be offered participation in one of the other SSI programs.

**Contact Information:**

Applicant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email \_\_\_\_\_ Race \_\_\_\_\_ M/F \_\_\_\_\_

Name of Parent(s)/Guardian \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (Daytime) \_\_\_\_\_ (Cell) \_\_\_\_\_

**Citizenship:** I attest that I am (check one of the following)

A citizen of the United States

A noncitizen national of the United States (a person born in American Samoa, be a certain former citizen of the former Trust Territory of the Pacific Islands, or be in a class of certain children of non-citizens born abroad).

A lawful permanent resident (please provide a copy of your (USCIS document or other legal verification of your status)

An alien authorized to work (must provide expiration date, if applicable and must provide document number)

**Academic Information:**

1. College / University that you plan to attend next fall:

\_\_\_\_\_  
\_\_\_\_\_

Major: \_\_\_\_\_

2. List all courses you have taken in the following areas with a letter grade of "B" or better:

Science

Math

_____	_____
_____	_____
_____	_____

3. Scholastic awards or honors received:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. School/community activities in which you are involved:

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5. Do you have any allergies or medical conditions that would prohibit you from working in a research laboratory or clinical setting? No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

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6. Please indicate your career interest.

\_\_\_\_\_ Biomedical Research (please note specific area of interest) \_\_\_\_\_

\_\_\_\_\_ Health Related Profession (please specify) \_\_\_\_\_

\_\_\_\_\_ Undecided

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

**I certify that the information contained in this application is correct and complete. I grant permission for information concerning my educational records to be released to UAB for the purpose of establishing eligibility to participate in this program.**

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Applicant Signature

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Date

**To allow for full consideration of this student this completed form must be delivered or mailed to the address below by**

**5:00 p.m., Tuesday, March 12, 2024**

**Summer Science Institute III  
UAB Center for Community OutReach Development  
Community Health Services Building, Room 503  
933 19th Street South  
Birmingham, Alabama 35294-2041  
CORD Phone: 205-934-5171**



**UAB CORD SUMMER SCIENCE INSTITUTE 2024**  
**Teacher Recommendation Form**

**Application Deadline: Tuesday, March 12, 2024**

**Program Overview:** The UAB CORD Summer Science Institute III research internship is open to high school students completing their junior and senior years. Participation in the program includes an intensive 40 hours per week, eight-week internship. Prior to joining an assigned mentor's lab, the interns will attend an intensive 3-day orientation in which they will be trained in biomedical laboratory techniques. Each intern will be assigned to a UAB faculty research mentor under whom they develop an independent research project related to the mentor's research focus. At the end of the program, interns present their research at poster symposiums on UAB campus competing for monetary prizes and a scholarship to UAB.

Student Name: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

**Program Applying For: [EBSCO Summer Science Institute Research Internships](#)**

How long have you known this student and in what capacity?

Use the following scale to assess the student according to the other students that you have known over the past 3 years.

1. Lower 50%
2. Between the Top 20%-50%, Very Good
3. Between the Top 10-20%, Excellent
4. Top 3-10%, Outstanding
5. Top 3%, Very Best

Briefly explain or give specific example(s) that justify your ranking for each of the student's characteristics listed below, if they are at either extreme.

**ACADEMIC CHARACTERISTICS**

RANKING

JUSTIFICATION

\_\_\_\_\_ Independence and initiative:

\_\_\_\_\_ Motivation:

\_\_\_\_\_ Attention span:

\_\_\_\_\_ Ability to apply concepts in problem solving:

\_\_\_\_\_ Participates in class discussions:

\_\_\_\_\_ Potential for growth:

**PERSONAL CHARACTERISTICS**

RANKING

JUSTIFICATION

\_\_\_\_ Enthusiasm:

\_\_\_\_ Inquisitiveness

\_\_\_\_ Creativity and original thought:

\_\_\_\_ Disciplined work habits:

\_\_\_\_ Maturity:

\_\_\_\_ Respect for peers and teachers:

\_\_\_\_ Leadership skills:

\_\_\_\_ Special talents:

**Please feel free to share any additional information that you feel would be helpful in determining the suitability of this student for our program. Use additional paper, if necessary.**

We thank you for your assistance in advancing area students in science and technology.

Teacher Name: \_\_\_\_\_ School: \_\_\_\_\_ Phone #: \_\_\_\_\_

Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To allow for full consideration of this student the completed form must be delivered sealed or mailed to the address below **by 5:00 p.m., Tuesday, March 12, 2024.****

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UAB Center for Community OutReach Development  
Community Health Services Building, Room 503  
933 19th Street South  
Birmingham, Alabama 35294-2041

CORD Phone: 205-934-5171



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**Teacher Recommendation Form**

**Application Deadline: Tuesday, March 12, 2024**

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Student Name: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

**Program Applying For: Summer Science Institute, Research Intern**

How long have you known this student and in what capacity?

Use the following scale to assess the student according to the other students that you have known over the past 3 years.

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\_\_\_\_ Ability to apply concepts in problem solving:

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Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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