

Application for 2020 Regenerative Medicine Summer School

McGowan Institute for Regenerative Medicine June 7-13, 2020

l.	Personal Information				
	Full Name:				
	First Name:				
	Last Name:				
	Gender: Female /Male:				
	Date of Birth (mm/dd/yy):				
	Your Email:				
	Home Phone:				
	Cell Phone:				
II.	<u>University</u> :]		
	Address:				
	City:				
	State:	Zip:			
III.	Academic Information				
	Current Grade: Junior Soph	nomore			
	Credits Earned:	GPA:			
	Undergraduate Major:	Undergraduate Minor (if applicable):			
	Reference:				
	Please provide contact information for				
	Full Name:				
	E-mail:				
	Title:				

IV. To complete your application, on a separate paper— please respond to ONE of the following questions. Each essay should be 300-400 words and should be saved as a file named:

Essay Question_[your last name].

V.	I will need university housing during the Summer School. Yes \Box No \Box				
VI.	In addition to the 1-week regenerative medicine summer school, I wish to apply for the 7-week summer internship (June 15 – July 31, 2020) Yes \Box No \Box				
VII.	If "Yes" to above question, please describe your area(s) of research interest:				
VIII.	Provide the name(s) of any faculty for whom you've done research:				
IX.	Applicant's Statement and Signature Should I be admitted to Regenerative Medicine Summer School at the McGowan Institute- University of Pittsburgh, I agree that I will honor the University's academic and ethical standards and that I will abide by all requirements established by Summer School Programs concerning performance and conduct. I agree that Summer School Programs may dismiss any student whose performance is unacceptable or whose general conduct jeopardizes the community or is otherwise unacceptable. I certify that all of the information contained in this application is factually correct, is honestly presented, and contains no significant omissions. If, at a later date, it becomes clear that this is not true, I agree Summer School may revoke any offer of admission it makes to me or dismiss me from the program. Electronic Signature: Please type your First and Last Name I understand that checking this box constitutes a legal signature confirming that I acknowledge and agree to the above Terms of Acceptance.				

Describe your vision of regenerative medicine in the next 10 years

• Why are you interested in science and/or engineering?

Application Procedure:

• Application Deadlines:

Admissions are on a rolling basis. The deadline for submitting the application and all required documentation is March 31, 2020. Applicants will be notified of admissions decisions by April 15th.

How to Apply

Please complete this application (interactive version of the form is available at www.mirm.pitt.edu/professional-development/summer-school)

And also submit with the following:

- Official (sealed) copy of your transcript showing the last completed semester;
- A letter of recommendation from a teacher or advisor;
- Application essay (see questions on the application form);
- Current resume.

You can submit your application package by email (beckere2@upmc.edu) or by mail at the address below:

Mailing Address:

McGowan Institute for Regenerative Medicine Attention: Summer School Admissions Office 450 Technology Drive, Suite 300 Pittsburgh, PA 15219

Inquiries to Elaine Becker (beckere2@upmc.edu); Phone: 412-624-5325