



THE QUEEN'S MEDICAL CENTER

OFFICE OF RESEARCH & DEVELOPMENT

www.ord.queens.org

2017 SUMMER RESEARCH INTERNSHIP CALL FOR APPLICATIONS

Application Process: Deadlines and Notification

To be considered for the 2017 Summer Research Internship Program, applicants must complete:

- 2017 Summer Research Internship Application Form (4 pages)
- Personal Statement (500 words)
- Resume or CV (2-page limit)
- Copy of most current academic transcript (unofficial copies accepted)
- Two (2) letters of recommendation (sent directly from recommender)

All of the above items must be submitted electronically (preferred) or delivered to the Office of Research and Development on or before **Wednesday, February 1, 2017**. Students are selected competitively on the basis of overall qualifications and interests. Please see the *SRI Program Description* for eligibility requirements.

A maximum of 5 students will be selected and notified by the end of March 2017. Applicants may be contacted prior to this date if more information is needed. Those selected for participation in the SRI program will be required to confirm acceptance by the decision deadline, April 15, 2017. Applicants will continue to be notified via email until all available spots are filled.

Please send application packet as **one PDF attachment** to:

SRI@queens.org

If unable to email, applications may be mailed to:

The Queen's Medical Center, Office of Research & Development

Attn: Summer Research Internship Program

1301 Punchbowl Street

University Tower, Room 508

Honolulu, HI 96813

Contact Information:

Phone: (808) 691-4121

Email: SRI@queens.org

**OFFICE OF RESEARCH & DEVELOPMENT
2017 SUMMER RESEARCH INTERNSHIP
APPLICATION FORM**



Please type or print all information on this form. If you have questions, please email SRI@queens.org or call 808-691-4121.

A. PERSONAL INFORMATION

Last name: _____ First name: _____

Mailing (Permanent) Address: _____

Hawaii Address (if applicable): _____

Phone: _____ Contact person at this address:
Name: _____
E-mail: _____ Phone: _____

Are you currently a legal resident of Hawaii?
____ Yes
____ No

Do you have a family member who is employed by The Queen's Medical Center? (This information will be used to avoid potential bias during the selection process.)
____ No
____ Yes Name: _____; Department: _____

Hobbies/interests: _____

B. EDUCATION

Summary of university/college attendance (2016-2017 school year). Provide a transcript from each institution(s) attended (unofficial copies accepted).

University/College: _____ City, State: _____

GPA: _____ Credits earned: _____ Expected Grad Date (MM/YY): _____

Undergraduate: Freshman _____ Sophomore _____ Junior _____ Senior _____

Major/Area of Study: _____

Career goal(s): _____
(1st choice) (2nd choice)

C. AVAILABILITY AND COMMITMENT

Are you able and willing to commit to the entire period of the SRI program, June 5 - August 11, 2017 between the hours of 8 a.m. and 5 p.m?

_____ Yes _____ No

If your academic schedule conflicts with the dates of the SRI, specify your available dates below.

From: _____ To: _____

Would you be interested in attending an optional cultural excursion to a neighbor island? (Note: You will be responsible for all travel expenses.)

_____ Yes _____ No

Are you able to provide your own transportation to the various internship activity sites? (This information is used for planning purposes only.)

_____ Yes _____ No

How did you hear about this program? (Check all that apply)

- _____ Counselor/advisor
- _____ Science teacher or professor
- _____ Internet
- _____ Queen’s employee or staff Name: _____
- _____ Previous SRI intern Name: _____
- _____ Other Specify: _____

Clinical or research area(s) of interest: (This information will be used to match you to a mentor.)

D. REFERENCES

Two (2) letters of recommendation are required and must be received directly by the SRI program from the two individuals listed below by February 1, 2017. Letters should be on official institutional letterhead and no longer than 1 page in length. Referees may email a PDF version of the letter to SRI@queens.org.

Name: _____ Job Title: _____

Relationship to applicant: _____ Number of years known: _____

Phone number: _____ Email: _____

Name: _____ Job Title: _____

Relationship to applicant: _____ Number of years known: _____

Phone number: _____ Email: _____

E. PERSONAL STATEMENT

Write a personal statement in about 500 words (size 12 font, Times New Roman) describing your reasons for applying to the SRI program, what you expect to learn from the program, your personal and career goals, and how this program would help in achieving them. The intent of the personal statement is to give the selection committee a more personalized view of you.

F. RESUME OR CV

Prepare a resume or CV (2-page limit) and include the following information:

- Education
- Honors, if any
- Employment History – List your participation in any research- or health-related paid or unpaid positions. Include:
 - Start date and end date
 - Employer
 - Job Title
 - City, State
 - Phone number
 - Primary duties and responsibilities
- Research/Training Experience – List your participation in all college-level independent research/training projects.

- Program name
- School/Organization
- City, State
- Start date and end date
- Summary of research/training project

G. CERTIFICATION

I certify that the information provided in this application is true and correct. I authorize The Queen's Medical Center to make a full and complete investigation of my educational and/or employment history and to contact any current or former employer, person, school and/or other entities to provide information (including fact and/or opinion) they may have regarding me.

Signature: _____ Date: _____

Applications for the 2017 Summer Research Internship are due by **Wednesday, February 1, 2017**. Email 1) the completed application, 2) personal statement, 3) resume or CV and 4) transcript(s) as **one PDF attachment** to SRI@queens.org. Applications received after this date will not be considered.

For further information, contact:

The Queen's Medical Center
Office of Research & Development
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Honolulu, HI 96813
Phone: (808) 691-4121
Email: SRI@queens.org