September 24, 2012

Dear Student:

The Harvard Medical School Minority Faculty Development Program of the Office for Diversity Inclusion and Community Partnership and the Biomedical Science Careers Program (BSCP) wish to invite you to join us for “Skills Workshops for College Students and High School Seniors, Juniors and Sophomores” on Saturday, November 17, 2012 from 8:00 AM to 4:30 PM. The workshops will take place at the Harvard Medical School Daniel C. Tosteson Medical Education Center located at 260 Longwood Avenue in Boston.

**Purpose of “Skills Workshops for College Students and High School Seniors, Juniors and Sophomores”**
The objective of the “Skills Workshops for College Students and High School Seniors, Juniors and Sophomores” is to provide post-baccalaureates; college and community college students; and high school seniors, juniors and sophomores from underrepresented populations in medicine and science (particularly African Americans, Hispanics/Latinos and Native Americans/Alaska Natives) with concrete information on skills needed for success in their academic career. Some of the topics covered will be: Application Process for Medical/Graduate/Professional Schools, Application Process for College, Interviewing Skills, Tips for Resume and Personal Statement, Financial Aid, Transferring from a Two- to Four-Year College and Internship/Summer Opportunities. Please inform your parents/caregivers that there will be an optional informational session (at no cost) for them from 8:30 AM to 10:30 AM at the same location. They must register by returning the enclosed invitation form.

**Registration**
The application deadline is October 17, 2012. Applications will only be accepted as long as there is space available. Because of the space limitation, there will absolutely be no on-site registrations accepted on the day of the event; all participants must pre-register. There is no registration fee for the program. Continental breakfast and lunch will be provided.

**Application**
To participate in the program, please complete the attached application form and fax it to 617.432.3834, scan and email it to fahri_ercem@hms.harvard.edu, or mail it in the envelope provided to:

Biomedical Science Careers Program  
c/o Harvard Medical School  
164 Longwood Avenue, 2nd Floor  
Boston, Massachusetts 02115-5818

**Resume**
Although not a requirement, we urge you to include a copy of your resume with your application. We strongly encourage you to review your resume before sending it. For assistance, please visit the following link: http://my.simmons.edu/services/cec/docs/resume-writing.pdf. The information contained in your resume will be used by us to inform you about appropriate internship and employment opportunities.

By early November, you will receive an acceptance letter with more detailed information. If you have any questions or need assistance, please contact Lise D. Kaye at lise_kaye@hms.harvard.edu or 617.432.0552.

Sincerely,

Joan Y. Reede, M.D., M.P.H., M.B.A.  
Dean for Diversity and Community Partnership  
Harvard Medical School  
President and Chair  
Biomedical Science Careers Program

Lise D. Kaye  
Executive Director  
Biomedical Science Careers Program

Enclosures: student application, return envelope, parents/caregivers form and tentative agenda
"SKILLS WORKSHOPS FOR COLLEGE STUDENTS AND HIGH SCHOOL SENIORS, JUNIORS AND SOPHOMORES"

Harvard Medical School
Daniel C. Tosteson Medical Education Center

Saturday, November 17, 2012

TENTATIVE AGENDA

8:00 AM - 8:30 AM REGISTRATION - CONTINENTAL BREAKFAST
8:30 AM - 10:30 AM INFORMATIONAL SESSION FOR PARENTS/CAREGIVERS
9:30 AM - 10:30 AM OPENING SESSION
- Welcoming Remarks
- Plenary Session
8:55 AM - 9:00 AM BREAK
9:00 AM - 10:30 AM CONCURRENT WORKSHOPS
A. Application Process for College - High School Students
B. Interviewing Skills - High School Students
C. Application Process for Medical/Graduate/Professional Schools - College Students
D. Funding Your Education - College Students
E. Interviewing Skills - College Students
F. Tips for Resume/Personal Statement - College Students

10:30 AM - 10:40 AM BREAK
10:40 AM - 12:10 PM CONCURRENT WORKSHOPS
A. Application Process for College - High School Students
B. Interviewing Skills - High School Students
C. Application Process for Medical/Graduate/Professional Schools - College Students
D. Funding Your Education - High School Students
E. Interviewing Skills - College Students
F. Tips for Resume/Personal Statement - College Students

12:10 PM - 12:15 PM BREAK
12:15 PM - 12:45 PM PLENARY SESSION: Internships and Summer Opportunities
12:45 PM - 1:40 PM LUNCHEON and NETWORKING
1:40 PM - 1:45 PM BREAK
1:45 PM - 3:15 PM CONCURRENT WORKSHOPS
A. Transferring from a Two- to Four-Year College - Community College Students
B. Interviewing Skills - High School Students
C. Application Process for Medical/Graduate/Professional Schools - College Students
D. Funding Your Education - College Students
E. Interviewing Skills - College Students
F. Tips for Resume/Personal Statement - High School and College Students

3:15 PM - 3:30 PM BREAK
3:30 PM - 4:30 PM PANEL OF STUDENTS
STUDENT APPLICATION

SKILLS WORKSHOPS FOR COLLEGE STUDENTS AND HIGH SCHOOL SENIORS, JUNIORS AND SOPHOMORES
Saturday – November 17, 2012

CO-SPONSORS
Harvard Medical School
Office for Diversity Inclusion and Community Partnership
Minority Faculty Development Program
and
Biomedical Science Careers Program (BSCP)

I am a student in (Please check one):

☐ high school
☐ community college
☐ college
☐ post-baccalaureate: school __________________________ graduation year ________
☐ other (specify) __________________________

Complete and return in the envelope provided to:

Biomedical Science Careers Program
c/o Minority Faculty Development Program
Harvard Medical School
164 Longwood Avenue, 2nd Floor
Boston, MA 02115-5818

Name (Please print) __________________________ Last __________________________ First __________________________ Middle __________________________

Date of Birth __________________________

Social Security Number (Last 4 digits) ______ ______ ______ ______

☐ CURRENT ☐ PARENT(S)

Preferred Mailing Address (Please Check One)

Current Postal Mailing Address

Street ____________________________ Apt ______

City ____________________________

State ____________________________ Zip ______

Phone (_________) ____________________________

**Important Please Fill Out** Preferred Email Address

Secondary Email Address ____________________________

Current School/Institution ____________________________

Date of Entry ____________________________ Expected Year of Graduation/Program Completion ____________________________

Degree(s) Expected ____________________________ Major/Field of Study ____________________________

1. If you have received any honors, awards, scholarships, fellowships or special recognition, please list them:

________________________________________________________________________

Page 1 of 4
2. Briefly describe any extracurricular activities in which you have been or are now involved:


3. Please list any academic enrichment programs, clubs, etc. (e.g. after-school, Saturday, summer programs) in which you have participated or are currently participating:


4. Have you ever participated in or do you currently participate in any of the following programs? (Please check the appropriate box for each program)

   a. 1998 Biomedical Science Careers Student Conference
   b. 2000 Biomedical Science Careers Student Conference
   c. 2002 Biomedical Science Careers Student Conference
   d. 2004 Biomedical Science Careers Student Conference
   e. 2006 Biomedical Science Careers Student Conference
   f. 2008 Biomedical Science Careers Student Conference
   g. 2010 Biomedical Science Careers Student Conference
   h. 2012 Biomedical Science Careers Student Conference
   i. BSCP Workshops or Specialty Conferences
   j. New England Science Symposium
   k. Project Success
   l. Explorations and/or Reflection in Action

5. Have you ever participated in any of the following types of science program? (Please check the appropriate box for each)

   a. non-degree science education
   b. non-degree science research
   c. science work-study
   d. science internship
   e. science fellowship
   f. science career planning
   g. science mentoring
   h. science counseling
   i. science volunteer
   j. science enrichment

6. Briefly describe any special interests you may have:
7. Do you **currently** have a BSCP student advisor?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Do not know</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
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</tbody>
</table>

8. Do you **currently** have a mentor?  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Do not know</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

9. At what age did you become interested in science?  

<table>
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<tr>
<th>Yes</th>
<th>No</th>
<th>Do not know</th>
</tr>
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<tbody>
<tr>
<td></td>
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</tbody>
</table>

10. Have you ever been discouraged from pursuing any of the following? (Please check the appropriate box for each)  

   a. college-level studies  
   b. advanced graduate studies  
   c. career in science or engineering  
   d. career in general  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Do not know</th>
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</table>

11. In your current school setting, has anyone discussed with you any of the following topics? (Please check the appropriate box for each topic)  

   a. your professional goals  
   b. research traineeships, awards for minorities available to you  
   c. participation in any research projects outside of class  
   d. science internship or fellowship opportunities  
   e. biomedical sciences career opportunities  
   f. the possibility of pursuing an academic/research career  
   g. the importance of networking  
   h. the purpose of having a mentor  
   i. membership in professional organizations  

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Do not know</th>
</tr>
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</table>

We request that you please answer the following two optional questions:

12. Please circle your predominant race/ethnic background (for Multiple Races, specify in respective categories below):

   ☐ Asian  
   ☐ Chinese  
   ☐ Filipino  
   ☐ Indian  
   ☐ Japanese  
   ☐ Korean  
   ☐ Vietnamese  
   ☐ Other (Specify)  

   ☐ Black (not Hispanic/Latino)  
   ☐ African (Specify)  
   ☐ Caribbean (Specify)  
   ☐ Other (Specify)  

   ☐ Hispanic/Latino  
   ☐ Cuban  
   ☐ Mexican/Mexican American  
   ☐ Puerto Rican  
   ☐ South or Central American (Specify)  
   ☐ Other (Specify)  

   ☐ Native American/Alaska Native  
   ☐ Native Hawaiian/Other Pacific Islander  
   ☐ Other (Specify)  

   ☐ Unknown  
   ☐ White (not Hispanic/Latino)  
   ☐ Multiple Races  
   (Specify in respective areas above)

13. Please circle your gender:  
   a. Male  
   b. Female
14. Please indicate the highest educational level attained by your parents:

**MOTHER**

☐ Some high school  ☐ Some college  ☐ Some graduate/professional school  ☐ Do not know
☐ Completed high school/GED  ☐ Completed college  ☐ Completed graduate/professional school
☐ Other (specify)

**FATHER**

☐ Some high school  ☐ Some college  ☐ Some graduate/professional school  ☐ Do not know
☐ Completed high school/GED  ☐ Completed college  ☐ Completed graduate/professional school
☐ Other (specify)

15. Is either one of your parents involved in a science/health-related profession?  ☐ Yes  ☐ No

*************************************************************************

By signing this application, I (or my parent or guardian on my behalf) hereby:

(A) acknowledge(s) and understand(s) that Biomedical Science Careers Program, Inc. (BSCP) will retain the information in this application for its records, and that this information, about the applicant, including identifying information, will be used to track students through their academic and professional careers, and for future promotional and other communications, such as the BSCP newsletter; (B) consent(s) to photographic, audio, video, or electronic images of the applicant to be used by BSCP for exhibition, public display, publication, news media story, video, audio, or other electronic media, such as the Internet, television, CDROM, or DVD; (C) release(s) BSCP, including each of its directors, officers, employees and agents, waive(s) all known and unknown claims against any of them, and agree(s) not to sue any of them on account of or in conjunction with any claims, causes of action, injuries, damage, cost of expenses arising out of the applicant's participation in the Workshops, whether or not caused by the acts, omissions or other fault of the parties being released; and (D) acknowledge(s) and represent(s) that he or she has carefully reviewed this application, including the foregoing acknowledgement, consent, release, waiver and agreement not to sue and understand(s) what each of them mean, and that my/their signature below indicates that delivery of this application to BSCP is my/their free act and deed.

Signature (REQUIRED) __________________________________________________________________________ Date __________________________________________________________________________

Print Name ____________________________________________________________________________________________

(If applicant is less than 18 years of age)

Parent/Caregiver's Signature: __________________________________________________________________________ Date __________________________________________________________________________

Parent/Caregiver (Please print): __________________________________________________________________________

An addressed envelope is provided for mailing. You may also fax the application to 617.432.3834, or scan and email to fahri_erem@hms.harvard.edu. If you have any questions, please contact the Biomedical Science Careers Program at: fahri_erem@hms.harvard.edu or 617.432.2729. Thank you.

Applications must be returned by October 17, 2012 and will only be accepted as long as space allows.

!!!! EARLY SUBMISSION OF APPLICATION IS HIGHLY RECOMMENDED !!!!

Web sites: www.bscp.org and www.mfhp.med.harvard.edu
Invitation to Parents/Caregivers

TO ATTEND AN INFORMATIONAL SESSION DURING

“Skills Workshops for College Students and High School Seniors, Juniors and Sophomores”

CO-SPONSORS
Harvard Medical School
Office for Diversity Inclusion and Community Partnership
Minority Faculty Development Program
and
Biomedical Science Careers Program (BSCP)

Date: Saturday, November 17, 2012
Time: 8:30 AM - 10:30 AM
Location: The Daniel C. Tosteson Medical Education Center – Harvard Medical School
260 Longwood Avenue, Boston, Massachusetts

Topics: General Information on Career Planning, Educational Options and Financial Aid

If you would like to attend, please complete the form and fax to 617.432.3834; scan and email to
sahri_ercem@hms.harvard.edu, or mail to: Biomedical Science Careers Program, c/o Harvard Medical School,
164 Longwood Avenue, Boston, Massachusetts 02115-5818

Student Name _______________________________________________________________________

High School Student_____ College Student_____ 

PLEASE FILL OUT BOTH SECTIONS IF TWO PARENTS/CAREGIVERS ARE ATTENDING.

Parent/Caregiver Attending Event (Please Print) Parent/Caregiver Attending Event (Please Print)
_________________________________________________________________________________

Street Address _________________________________________________________________ Street Address _________________________________________________________________
_________________________________________________________________________________

Apt. ______ Apt. ______

City __________________________ City __________________________

State ______ Zip Code ______ State ______ Zip Code ______

Home Phone Number __________________________ Cellular Number __________________________

Email Address __________________________ Email Address __________________________

I will need a parking reservation: Yes____ No____ I will need a parking reservation: Yes____ No____

Please return form promptly so we can mail you directions on time.

SPACE IS LIMITED. PLEASE REGISTER EARLY.
NO REGISTRATION FEE