Applicants MUST meet the minimum following requirements in order to be considered as eligible for the MHIRT program:

- Be a US Citizen, Non-citizen National of the U.S., or Legal Permanent U.S. Resident (birth certificate or passport required);
- Have a 3.25 GPA minimum (unofficial transcript required);
- Be in a Junior, Senior or Graduate Student at UTEP (unofficial transcript required);
- Be enrolled as a full-time student at the time of application and program participation;
- Have a declared major in a pre-professional basic science, health, or human service discipline both during the time of application and program participation;
- Applicants must be individuals from a group underrepresented in biomedical, behavior, clinical and social sciences. This includes members of racial and ethnic groups that have been identified by the National Science Foundation to be underrepresented in biomedical research (including Blacks, African Americans, Hispanic Americans or Latinos, American Indians and Alaska Natives, Native Hawaiians and other Pacific Islanders); rural and low socio-economic groups.

The above are BASIC program requirements which MUST be met. There are no exceptions as these are requirements from the funding source for this program.

Additional Program Requirements:

- Spanish fluency (oral, written and spoken)
- Dedicate full time to MHIRT program participation during Mid-May through program completion date (mid-August) which requires that applicant not be employed during time of MHIRT program participation/experience.
- Applicants graduating during spring 2017 must provide a copy of their graduate school application with their MHIRT application.
Additional Program Requirements:

Applicants are required to complete Course 3380/5380 Special Topics in Health Sciences (Hispanic Health Disparities) during the 2017 Maymester and Course 3180/5180 Special Topics in Health Sciences: (Directed Research and Statistics) during Summer I semester.

Each applicant MUST submit a RESUME, UNOFFICIAL TRANSCRIPT and THREE LETTERS OF REFERENCE (minimum of 2 letters must be from professors: current or past) as part of their application. All required documents MUST BE SUMBITTED AT THE TIME OF APPLICATION. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. Applicants meeting ALL eligibility requirements as noted above will be interviewed during the week of November 28-December 2, 2016 by the MHIRT Faculty Committee.

PERSONAL INFORMATION

Applicant Name:

First  Middle  Last

Cell Phone # (  ) __________________________  UTEP Email Address: __________________________

UTEP STUDENT ID # __________________________

CONTACT INFORMATION

Permanent Mailing Address (This should be an address where you can always be reached) such as your parent’s or relative’s address.

Parent’s or Relative’s Name

Street Address:

City  State  Zip Code

(  ) __________________________  (  ) __________________________
Telephone of parent/relative  Cell # of parent/relative

(  ) __________________________
Alternate Cell Phone # for parent/relative
ACADEMIC INFORMATION

Declared Academic Major: __________________________ Overall GPA: ___

Classification:  Junior: _____ Senior: _____ Graduate Student: _____

Total # of semester credit hours to be completed at the end of current semester: _____

Anticipated Graduation Date: ________________

Are you currently receiving financial aid or a scholarship? Yes ____ No ____

DEMOGRAPHIC INFORMATION

Citizenship Status: Check ONE Only

Are you a United States Citizen: ___

Non-Citizen National of the U.S.: ___

Legal Permanent U.S. Resident: ___

Ethnicity Category: Check ONE Only

Hispanic or Latino: ___

Non-Hispanic or Latino: ___

Race Category: Check ONE Only

American Indian/ Alaskan Native: ___ Asian: ___

Black or African American: ___ Native Hawaiian/Pacific Islander: ___

White: ___ Other: _________________________ ___

EMPLOYMENT AND VOLUNTEER SERVICE HISTORY

Are you employed?

No: _____

Yes: _____ Employer: __________________________ Hours/Week: ___

Supervisor’s Name: Employer’s ____________

Address: Employer’s Telephone __________________________

Number: __________________________
Current Volunteer work or community service:

Not Applicable at this time: ____

Name of Organization: ____________________________________________
Supervisor’s Name: ________________________________________________
Organization Address: ____________________________________________
Organization Telephone Number: _______ # of Volunteer hours/week ____
Duties: __________________________________________________________

*If the above space is not sufficient, please include pertinent details in resume.

SPANISH LANGUAGE COMPETENCY (SELF-ASSESSMENT)

Ability to **READ** in Spanish:
Yes/Fluently: _____ Limited: _____ No: _____

Ability to **SPEAK & COMPREHEND** Spanish:
Yes/Fluently: _____ Limited: _____ No: _____

Ability to **WRITE** in Spanish:
Yes/Fluently: _____ Limited: _____ No: _____

PERSONAL STATEMENT

Please explain in **500 words or less** why you should be chosen for this MHIRT Project. **Your 500 word personal statement (do not exceed 500 words) should be written using 12-point Times New Roman font and should help us learn more about you as a student and potential program participant.**

In your written narrative, elaborate your experience and interests in research and specifically, in becoming a Hispanic Health Disparities researcher by addressing the following points:

1. What interests you about Hispanic health disparities and why?
2. How will participation in this program assist you in advancing your academic or career objectives?
3. Include a summary of your background, attributes, and skills which highlight your specific qualifications which make you an outstanding applicant for MHIRT Project.
REFERENCES

Please provide three letters of reference from individuals who can discuss your academic abilities as well as your character and ability to adjust to diverse settings/environments. Two of these letters MUST be from UTEP Professors with whom you have taken a class or are currently taking a class with.

In addition to the Letters of Reference, please include the following information for EACH individual who is providing a recommendation letter for you:

RECOMMENDER (1)

NAME: ________________________________________________

CONTACT TELEPHONE NUMBER: __________________________

EMAIL ADDRESS: ________________________________________

RECOMMENDER (2)

NAME: ________________________________________________

CONTACT TELEPHONE NUMBER: __________________________

EMAIL ADDRESS: ________________________________________

RECOMMENDER (3)

NAME: ________________________________________________

CONTACT TELEPHONE NUMBER: __________________________

EMAIL ADDRESS: ________________________________________
APPLICATION CHECKLIST

Check off each item to indicate/ensure that you have submitted all items as part of your application packet. INCOMPLETE PACKETS WILL NOT BE ACCEPTED/MODIFIED and you will NOT be scheduled for an INTERVIEW. ELECTRONIC APPLICATION PACKETS WILL NOT BE ACCEPTED.

APPLICATION DEADLINE: November 11th, 2016 @ 5:00 p.m. local time

1. Completed application: __________
2. Transcript: __________
3. Resume: __________
4. Letters of Reference (3): __________
5. Personal Statement: __________
7. Current Government issued ID (If applicable): __________
8. Current Passport (If applicable): __________

________________________________________________________________________
SIGNATURE ___________________________ DATE ___________________________

Please be sure that all of the required information and documents are contained in your application packet. **SUBMIT SIX (6) COPIES (front-sided copy only no double-sided copying please) of your COMPLETED application in one package with your name on it. Hand-delivered application packet should be addressed to:**

Ms. Leticia Paez,
MHIRT Program Manager
The University of Texas at El Paso
Health Sciences & Nursing Building
Dean’s Office Front Desk
Room 368

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