



## **PROJECT SUCCESS: OPENING THE DOOR TO BIOMEDICAL CAREERS**

**Deadline for receipt of COMPLETE application (including recommendations):**

**Friday, April 29, 2022 by 5:00 PM** emailed to [Projectsuccess@hms.harvard.edu](mailto:Projectsuccess@hms.harvard.edu)

**Program description:** Opening the Door to Biomedical Careers is a program for BOSTON and CAMBRIDGE high school students only, particularly underrepresented and/or disadvantaged students, to participate in paid, mentored, summer research internships at Harvard Medical School and its affiliated institutions. The program is augmented by seminars and workshops given by faculty and administrators, site visits, and career counseling.

### **Eligible participants:**

- Must have a home address in Boston or Cambridge, Massachusetts
- Are currently in grade 11 or 12 with a **minimum 2.70 Grade Point Average (GPA)**
- Are at least 16 years of age by June 24, 2022
- Have completed algebra, biology, and chemistry by program start
- Must be able to provide documentation that they are allowed to work
- Must provide current high school transcript beginning with 9th grade

All application materials must be submitted electronically by 5pm on Friday, April 29, 2022. The high school program is four (4) weeks, from July 5, 2022- July 29, 2022. You must be able to commit to the entire four weeks.

### **Harvard University COVID 19 Guidelines**

Harvard requires COVID vaccination for all Harvard community members. Individuals may claim exemption from the vaccine requirement for medical or religious reasons. More information regarding the University's COVID vaccination requirement, exemptions, and verification of vaccination status may be found at the University's "COVID-19 Vaccine Information" webpage: <http://www.harvard.edu/coronavirus/covid-19-vaccine-information/>.

## Part 1: Student Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Apartment: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_

How old will you be on June 24, 2022? \_\_\_\_\_

Current High School: \_\_\_\_\_

Current School Grade:

Junior (11th)

Senior (12th)

Expected Year of High School Graduation:

2022

2023

## Guidance Counselor Information

Guidance Counselor Name: \_\_\_\_\_

Guidance Counselor Phone: \_\_\_\_\_

Guidance Counselor Email: \_\_\_\_\_

*Please sign your initials below once you have completed the following task:*

\_\_\_\_\_ I requested that my Guidance Counselor send my current transcript to **projectsuccess@hms.harvard.edu**.

How did you hear about the Project Success program? (check all that apply)

High school guidance counselor

Former Project Success participant

Bulletin board

HPREP

High school science teacher

Harvard Medical School faculty member, physician or administrator

Biomedical Science Careers Program (BSCP)

Hinton Scholars AP Biology

Medscience

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

## Family Information - Parent/Guardian

### *Parent/Guardian 1*

Parent/Guardian 1 Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Apartment: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### *Parent/Guardian 2*

Parent/Guardian 2 Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Apartment: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Part 2: Applicant Profile

Please list any honors, awards, or special recognitions that you have received.

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Briefly describe any of your past or present extracurricular activities, especially those related to science and/or health.

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Briefly describe any special interests you may have.

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List any community or national organizations to which you belong.

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Have you ever participated in any of the following types of science programs?

- A. Non-high school sponsored science education program

- Yes                       No                       Do Not Know
- B. Science research
- Yes                       No                       Do Not Know
- C. Career educational planning
- Yes                       No                       Do Not Know
- D. Science mentoring
- Yes                       No                       Do Not Know
- E. AP Biology Hinton Scholars
- Yes                       No                       Do Not Know
- F. Biomedical Science Careers Program (BSCP)
- Yes                       No                       Do Not Know
- G. HPREP
- Yes                       No                       Do Not Know
- H. Medscience
- Yes                       No                       Do Not Know
- I. Vertex Learning Labs
- Yes                       No                       Do Not Know
- J. Mass Insight
- Yes                       No                       Do Not Know

Have you taken any of the following examinations? If so, please indicate your **Verbal and Math** scores?

\_\_\_\_ PSAT (Verbal Score: \_\_\_\_\_ Math Score: \_\_\_\_\_ )

\_\_\_\_ SAT (Verbal Score: \_\_\_\_\_ Math Score: \_\_\_\_\_ )

\_\_\_\_ ACT (Verbal Score: \_\_\_\_\_ Math Score: \_\_\_\_\_ )

What is your current high school grade point average (GPA)? \_\_\_\_\_

### Part 3: College

Will you attend college after you graduate from highschool? (please check one)

Yes

No

Undecided

Are you the first in your family to attend college?

Yes

No

Has one of your parents attended college?

Yes

No

**Please answer these questions if you plan to attend college.**

What colleges or universities are you considering?

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What would you like to study?

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**Answer if you do NOT plan to immediately attend college.**

What will you do after graduation?

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What do you see yourself doing in **two (2)** years?

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Briefly describe what you would like to gain from your participation in the Project Success high school program?

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Describe three (3) talents and/or skills that you feel have made you successful in your academic career.

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#### **Part 4: Candidate Background**

*Please answer the following optional questions*

Indicate your predominant ethnic background.

Asian

- Black (not Hispanic/Latino)
- Hispanic/Latino
- American Indian/Alaska Native (Specify Tribal Affiliation): \_\_\_\_\_
- Native Hawaiian/Other Pacific Islander
- White (not Hispanic/Latino)
- Other (Specify): \_\_\_\_\_

If you are predominantly Asian, please specify your ethnicity:

- Chinese
- Filipino
- East Indian
- Japanese
- Korean
- Vietnamese
- Other (Specify): \_\_\_\_\_

If you are predominantly Black (not Hispanic/Latino), please specify your ethnicity:

- African-American
- African (Specify Country): \_\_\_\_\_
- Afro-Caribbean (Specify Country): \_\_\_\_\_
- Other (Specify): \_\_\_\_\_

If you are predominantly Hispanic/Latino, please specify your ethnicity:

- Cuban
- Dominican



- Mexican/Mexican American
- Puerto Rican
- South or Central American (Specify Country): \_\_\_\_\_
- Other (Specify): \_\_\_\_\_

How do you identify your gender?

- Female
- Male
- Non-binary/third gender
- Prefer not to say
- Prefer to self-describe: \_\_\_\_\_

Do you receive free or reduced rate meals at school?

- Yes  No

## **Part 5: Recommendation & Statement of Interest**

Applications will not be evaluated until they are completed. Complete applications include one recommendation from a high school science teacher that should be emailed by the teacher to **Projectsuccess@hms.harvard.edu**. This recommendation should discuss the student's academic performance, aptitude for collaborative work, interest in biological and/or medical research, potential achievement within research, and any other relevant information.

The applicant should not have access to, or read, the recommendation written by the teacher.





## Part 6: Parental Consent

### *Parent Consent*

In signing this form, I certify that this application has been read and that the information is correct to the best of my/our knowledge. I have reviewed the 2022 Project Success Announcement, and I consent for my son or daughter to participate in the Project Success Program if he/she is selected. I further understand that the selection is the responsibility of the program. I understand that Project Success 2022 will be offered as a remote online program. I agree to have my son or daughter follow all Harvard University health policies. I authorize the program to use still or video photographs of my child for publicity purposes.

\_\_\_\_\_ X \_\_\_\_\_  
Parent Name (Printed) Parent Signature

Date of Signature (MM/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_\_

### *Student Consent*

I am willing to abide by the conditions and regulations set forth by the Project Success Program. I realize that failure to comply with these rules may result in dismissal from the program.

\_\_\_\_\_ X \_\_\_\_\_  
Student Name (Printed) Student Signature

Date of Signature (MM/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_\_

*Parent/Guardian please read and sign below.*

I am willing to have my child abide by the conditions and regulations set forth by the Project Success Program.

\_\_\_\_\_ X \_\_\_\_\_  
Parent Name (Printed) Parent Signature

Date of Signature (MM/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_

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