

*The Art and Science of Medicine*  
*HHMI Summer Program at Kalamazoo College*  
**Application Form**  
*Summer Camp for High school sophomores, juniors & seniors*  
*June 22 to June 28, 2008*

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**INSTRUCTIONS:** Please complete this form, enclose a copy of your high school transcript and return both to:

Dr. Regina Stevens-Truss  
Director of the Arts and Science of Medicine Program  
Kalamazoo College  
1200 Academy St.  
Kalamazoo, MI 49006

**Application Due Date: OPEN**

**However, review of applications will begin on March 31, 2008 and continue until the program is filled.**

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**Personal Information**

Your legal name: Last  First  Middle

Street Address

City  State  Zip

Area Code/Phone Number  email address

Sex:  Male  Female      How would you describe yourself? (optional)       African American or Black       Asian or Pacific Islander  
 Multiracial       Hispanic or Latino  
 Native American or Alaskan Native       White

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Mother's (or Guardian's) Full Name

Home address and telephone number, if different from yours

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Father's (or Guardian's) Full Name

Home address and telephone number, if different from yours

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\* Remember: You must have your counselor forward your transcript to me. Your application will not be reviewed without it.

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**Academic Information**

Your High School

Your school counselor's name  Request given to counselor: Yes No      Date:

Teacher's name who is writing recommendation for you  Request given to teacher: Yes No      Date:

Future career interest

**In 5 to 10 sentences, state why you want to participate in this summer program including your future career plans.**

**This is a 1-week residential science workshop that is intended for high school students who are planning on pursuing careers in medicine. It includes classroom work 50% of the time and fieldwork the other 50%. If accepted you are required to stay the full length of the program at Kalamazoo College. In 5 to 10 sentences, state why you want to participate in this summer program including your future career plans.**