

Student Application Brain Camp @ UCSF 2018

July 30th – August 4th 2018: Monday – Saturday, 8:30 am – 4:00 pm

Application Deadline: February 15th, 2018

Directions: Thank you for your interest in *Brain Camp @ UCSF* – we can't wait to get to know who you are! The Camp is free, for **current sophomores or juniors**, and for students who have achieved a **C or higher in a high school biology class**. Be sure to visit our website at ilovebraincamp.org for more information!

This application consists of several short sections, and all of them need to be completed prior to the deadline on **February 15th, 2018**. We will notify you about the status of your application no later than **March 15th, 2018**.

Below, you'll find a handy application checklist. Please place a check-mark next to each item as you complete them.

Application Checklist

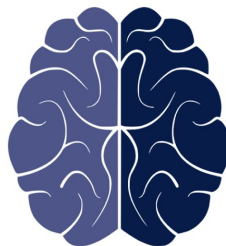
- Applicant Information
- Paragraph statements
- Signed grade verification form
- Signed student commitment
- Signed parent/guardian permission

There are three ways to submit the completed application:

- (1) **Online** through the application link on our website ilovebraincamp.org/student-application
- (2) **Fax** the completed application to (415) 502-6400.
- (3) **Mail** the application to:

EAOP/UCSF
Campus Box 0934
San Francisco, CA 94143-0934

Do you have questions? We have answers if you **call** (415) 439-0436 or **email** us at ilovebraincamp@gmail.com.



Applicant Information

Student's Full Name: _____
Last First Middle Initial

Street Address or P.O. Box: _____

City/State/Zip: _____ **Phone:** _____

E-mail Address: _____ **Date of Birth:** _____

Gender: Male Female Other **T-Shirt Size (XS, S, M, L, XL):** _____

Dietary Restrictions (e.g. gluten-free, vegetarian): _____

School Name: _____ **Grade Level:** _____

I have previously applied to Brain Camp: Yes No

I have previously attended Brain Camp: Yes No

Ethnicity (check one or more): *Information on ethnicity is used for demographic purposes only. The UCSF Center for Science and Education Opportunity is firmly committed to encouraging diversity in its programs.*

- | | |
|-------------------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> African American / Black | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> American Indian / Alaskan Native | <input type="checkbox"/> Vietnamese / Vietnamese American |
| <input type="checkbox"/> Chinese / Chinese American | <input type="checkbox"/> White / Caucasian |
| <input type="checkbox"/> East Indian / Pakistani | <input type="checkbox"/> Other Asian |
| <input type="checkbox"/> Filipino / Filipino American | <input type="checkbox"/> Other Spanish American / Latino |
| <input type="checkbox"/> Japanese / Japanese American | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Korean / Korean American | <input type="checkbox"/> Decline to state |
| <input type="checkbox"/> Mexican/ Mexican American/ Chicano | |

Primary Language(s) Spoken at Home: _____

Total Family Income:

- | | | |
|----------------------------------------------|----------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Less than \$20,000 | <input type="checkbox"/> \$20,000 - \$29,999 | <input type="checkbox"/> \$30,000 - \$39,999 |
| <input type="checkbox"/> \$40,000 - \$49,999 | <input type="checkbox"/> \$50,000 - \$59,999 | <input type="checkbox"/> \$60,000 - \$69,999 |
| <input type="checkbox"/> \$70,000 - \$79,999 | <input type="checkbox"/> \$80,000 - \$89,000 | <input type="checkbox"/> \$90,000 or greater |
| <input type="checkbox"/> Decline to state | | |

Highest Level of Education Completed:

	Father/Guardian 1		Mother/Guardian 2		Student's Goal
Unknown or not available	<input type="checkbox"/>		<input type="checkbox"/>		
Never Attended School	<input type="checkbox"/>		<input type="checkbox"/>		
Finished Six Years or less	<input type="checkbox"/>		<input type="checkbox"/>		
Finished Junior High	<input type="checkbox"/>		<input type="checkbox"/>		
Attended some High School	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
High School Graduate (HS diploma)	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
General Education diploma (GED)	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Attended some College or University	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Associates of Arts (AA, AS, etc.)	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Bachelor's Degree (BA, BS, etc.)	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Master's Degree (MA, MBA, etc.)	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Doctorate Degree (PhD, MD, EdD, etc.)	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
College degree obtained outside U.S.?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If obtained outside U.S., country acquired?	_____		_____		

Paragraph Statements

We'd like to get to know *you* better. Please write or type one paragraph (maximum 150 words per paragraph) on *each* of the following questions on a separate piece of paper:

1. Why are you interested in Brain Camp at UCSF?
2. Tell us about a significant adversity or challenge in your life and how you overcame it.

Grade Verification

Please put the names of all high school science courses you have completed AND the letter grade you received for each below:

Name of Course (grade) [Example: Biology (B)]: _____

By signing below, I have verified that I have achieved a grade C or better in a biology or health sciences course in high school. I understand that the health professions require the highest degree of honesty and by signing below I seek to uphold that standard.

Student Signature: _____

Date: _____

Student Commitment

I understand that *Brain Camp at UCSF* is a program for exposure to the health sciences field, and if accepted, I intend to participate fully. I am committed to attending *Brain Camp at UCSF* on time each day and putting forth my best effort. If accepted, I understand that I must commit to the entire program, including orientation. Please check the following boxes:

- I will attend all six days of *Brain Camp at UCSF* from July 30th to August 4th from 8:30 am to 4:00 pm. Don't worry, lunch will be included.
- I have completed a high school biology or health sciences course with a C grade or higher.
- I will be able to find transportation to and from UCSF's Parnassus Campus (505 Parnassus Ave.).
- I will be able to attend **Orientation** on **July 25th, 2018** at **UCSF's Parnassus Campus** from **5:30 pm to 7:00 pm** with at least one guardian. Dinner will be provided. More information will be sent out prior to the orientation. Below please fill out the number of people attending (excluding yourself), their affiliation to you, and any dietary restrictions they may have.

Number of guests (excluding yourself): _____

Relationship to you: _____

Dietary restrictions of guests (e.g. none, vegetarian, gluten-free): _____

Student Signature: _____

Date: _____

Parent/Guardian Permission

I give permission for my child to attend *Brain Camp @ UCSF*. I understand that, if accepted, **my child must commit to the entire program, including the program orientation**. **I personally commit to attending the parent/student program orientation on Wednesday, July 25th at 5:30 pm at the UCSF Parnassus Campus**. I will support my child's participation in *Brain Camp @ UCSF* and encourage my child to work hard and participate fully.

Parent/Guardian Signature: _____

Date: _____