



Minority Health International
Research Training Program
(E-MHIRT)



**PAID SUMMER 2014 RESEARCH
TRAINING PROGRAM
IN
SOUTH AFRICA**

DEADLINE: October 25, 2013

Admissions Application

The National Institute on Minority Health and Health Disparities (NIMHD) of the National Institutes of Health funds the Elizabeth City State University Minority Health International Research Training (E- MHIRT) Program. The E- MHIRT Program provides opportunities for minority students to be trained in either drug discovery for treatment of cancer, diabetes, hypertension and Alzheimer's disease or search of risk factors for Type 2 diabetes with emphasis on stressors, identifying prediabetes and improving diabetes self-management practices to minimize diabetes-related loss of eyesight, amputations, kidney dialysis and neuropathy.

DEADLINE:

October 25, 2013

SUBMIT COMPLETED APPLICATIONS TO:

Dr. E. T. Gwebu, Department of Chemistry, Geology &
Physics Room 306 Jenkins Science Center

1704 Weeksville Road, Campus Box 925 Elizabeth City, NC 27909

ELIGIBILITY:

Eligible candidates are individuals from health disparities groups that are underrepresented in health-related research. "Nationally, these groups include but are not limited to, African Americans, Hispanic Americans, Native Americans, Alaskan Natives, Native Hawaiians and Pacific Islanders, and rural Appalachians" (<http://grants.nih.gov/grants/guide/rfa-files/RFA-MD-04-004.html>). Candidates must be majoring in Chemistry, Physics, Biology, Sociology, Psychology and Pharmaceutical Science as undergraduates. Applicants must be in their sophomore, junior or senior year prior to the time of travel. A minimum cumulative GPA of 3.0 or higher in all class work to date and be either U.S. citizen or permanent resident. Applicants must demonstrate good citizenship, tolerance for other cultures, desire and motivation for academic advancement and evidence of integrity, excellent character as well desire for research.

APPLICATION PROCEDURES:

The following documents are required of all E-MHIRT applicants:

- ❖❖ A personal statement which includes the applicant's career aspirations and goals (Minimum of 500 words)
- ❖❖ Official Transcripts of all college courses completed and in progress.
- ❖❖ Three (3) letters of recommendation from two professionals, including **Department Chair or Advisor**, who are familiar with your academic and/or research experience and someone who can describe your character and dependability. **The letters should be attached to this application in sealed envelopes or mailed directly from the person providing the letter of recommendation.**

Elizabeth City State University

MINORITY HEALTH INTERNATIONAL RESEARCH TRAINING (E-MHIRT) PROGRAM

Application for Admission

Please type or print clearly

Deadline: October 25, 2013

A. Demographic/ Academic Data

NAME: _____

Sex: Female ___ Male ___

Current Address: (Use until _____)

Permanent Address: _____

Street _____

Street _____

City _____ St _____ Zip _____

City _____ St _____ Zip _____

Local Phone _____

Cell Phone _____

E-Mail address _____

Permanent Phone _____

Date of Birth _____

Local Phone _____

Citizenship/Residency: [] U.S. Citizen

(Proof must be copied and attached) [] Permanent Resident #

Please identify and specify your ethnic origin: (Minority status required for participation)

[] Asian American

[] Native American

[] Black/African American

[] Pacific Islander

[] Hispanic

[] other (specify) _____

Major: _____ Credits Completed: _____ Class Status: (Soph.) (Jr.) (Sr.)

Overall GPA _____ *MUST ATTACH MOST TRANSCRIPT*

What is your expected Graduation Date: _____

Do you plan to attend: [] Graduate School [] Medical School [] Dental School [] Pharmacy

Other (specify) _____

B.ESSAY:

Part 1. A personal statement which includes the applicant's career aspirations and goals
(Minimum of 500 words)

Part 2. Describe in detail your knowledge of health disparities in the USA. Be sure to show evidence of internet research.

Part 3. Describe in detail what you know about South Africa.

Must be typed and submitted as an attachment.

C.LETTERS OF REFERENCE:

You must provide **three** letters of recommendation on the forms provided. **The letters should be attached to this application in sealed envelopes or mailed directly from the person providing the letter of recommendation.** Please specify who will be providing these letters below:

(1) Name: _____ (2) Name: _____ (3) Name: _____

Position/Title: _____ Position/Title: _____ Position/Title: _____

Address: _____ Address _____ Address _____

Telephone: _____ Telephone: _____ Telephone: _____

Fax: _____ Fax: _____ Fax: _____

Email: _____ E-mail _____ E-mail _____

**ECSU MINORITY HEALTH INTERNATIONAL RESEARCH TRAINING
PROGRAM (E-MHIRT)**

Department of Chemistry, Geology & Physics
Elizabeth City State University

Professional Recommendation
E-MHIRT Program

To be completed by applicant:

Applicant's Name _____

Last 4 Digits of Soc. Sec. # _____

I have have not waived my choice to review this completed letter of recommendation.

Applicant's Signature _____/Date: _____

This recommendation form should provide a candid and accurate evaluation of the applicant's academic and/or research capabilities. Please include any pertinent information, as well as your opinion on the student's prospects for obtaining an advanced degree in a research/ professional career, and if you will discriminate between the applicant's strong and weak characteristics. **Please return recommendation in a sealed envelope with your signature across the seal.** Thank you for your cooperation.

How long have you known the applicant? _____ In what capacity? _____

Your evaluation of the applicant: (Separate page(s) may be attached)

Please rate the applicant in comparison with other students you have known in the past:

Character	Strongly Disagree	Disagree	Agree	Strongly Disagree	No basis to assess
Has Integrity					
Very Dependable					
Exhibits Teamwork Spirit					
Has Positive Attitude					
Has critical thinking skills					
Work well with others in a group setting					
Willingness to accept and follow instructions					

Name: _____ Position/ Title: _____ E-Mail: _____