

University of Pittsburgh

Department of Biological Sciences

Gene Team Student Application

June 22—August 4, 2009

9:00 a.m. – 5:00 p.m.

Application must be typed or printed clearly in ink.

Send completed application and letter of reference to:

Gene Team Application
c/o Brian DiRienzo
University of Pittsburgh
Department of Biological Sciences
A234 Langley Hall
Pittsburgh, PA 15260

- Application must be received by March 31, 2009.
- Notification of acceptance will be made by April 2009.

Name:

Last _____ First _____ MI _____

Male ___ Female ___ Age: _____

Current grade level: _____

(optional) Are you a member of an under-represented group or minority? Yes ___ No ___

If yes, please circle one:

African-American Asian/Pacific Islander Hispanic Native American

Home Address: _____

Home Phone: _____

Email: _____

School: _____

School address: _____

How did you hear about this program?

Teacher Web site Another student

Other _____

Biology course(s) previously taken Grade(s) _____

Other science related activities: (classes, workshops, camps, competitions)

Check if you have participated in

Gene Team Summer Seminar Series

Gene Team Science Corps (K-8 instruction)

What topics in biology do you find most interesting, or want to learn more about?

What are your plans after graduating from high school?

Why are you interested in attending this program?

Anything else you would like to say to promote your admission to the Gene Team?

Please attach a letter of reference from a teacher or guidance counselor in a sealed envelope, with reference signature across envelope seal. Letter should be on the attached form.

Reference name:

Title/relationship to applicant:

Phone:

Email:

Frequently Asked Questions

XX What will I be doing in the program? You will carry out state-of-the-art biomedical research projects, teamed with other high-school students and teachers. You will also attend a few lectures by Pitt faculty and graduate students.

XX What are the educational qualifications? You must have completed one year of high school Biology.

XX Do I need to have had previous research experience? No, we will learn together and teach you everything that you will need to know. Pitt graduate students and advanced undergraduates will be in lab each day for additional support and assistance.

XX What are the working hours for the program? You will be in the lab on the Pitt campus Monday through Friday, 9 AM to (approximately) 5 PM.

XX I have a family vacation planned. Will I have to miss it? No. Because of the team structure, it is permissible for each participant to miss up to one week of the summer session. **You are not permitted to miss the first week or the last week of the program.**

XX Do I get paid? Yes. Students receive a total stipend of \$2,000, paid in equal installments June 30 and July 31.

XX How about transportation to campus? Free Port Authority bus passes are available. There is often free on-street parking in the summertime, if you arrive early in the day.

XX How do I apply for this program? Complete the attached application form. Return your application and the letter of reference from a teacher to A234 Langley Hall Department of Biological Sciences University of Pittsburgh, PA. 15260 (fax 412-624-4759) no later than 5pm on **March 31, 2009**. Online Applications are also available at <http://outreach.plebianweb.com/page.php?71>

XX When will I find out if I'm accepted to the program? Applicants will be notified by the end of April.

XX How do I get more information or answers to other questions? Contact Brian DiRienzo at 412-383-5921 <bdd4@pitt.edu>. We welcome all questions and would love to speak with you about the program.

University of Pittsburgh

Department of Biological Sciences

Gene Team Teacher Reference Form

_____ (student name) has applied to join the Gene Team, a summer laboratory research program. Please help us evaluate this applicant by filling out this form. Feel free to attach a separate letter ***in addition to the form*** if you feel that it will be useful.

Please consider that we will not necessarily accept only the students rated highest by these criteria. We also take into account geographical and cultural diversity, program balance, and other things.

Please rate the applicant according to the following characteristics, comparing with other students now or previously in your classes. Indicate ratings by an X in the appropriate box:

		Excellent (Top 10%)	Very Good (Top 25%)	Good (Top 50%)	Fair (Top 75%)	Poor
Learns rapidly						
Learns deeply						
Behavioral maturity						
Oral communication						
Written communication						
Dependability						
Enthusiasm						
Drive & motivation						
Persistence						
Social skills						
Ability to work with others						

How well do you know this student?

___ Very well ___ Well ___ Somewhat ___ Not too well

Other comments (or attach letter):

Teacher signature _____ Date _____

Printed name _____

School _____

Send to:

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Fax 412-624-4759