

Department of Psychiatry University of Massachusetts Medical School 55 Lake Avenue North Worcester, MA 01655 508.856.8941 (office) 508.856.6426 (fax)

Neuroscience and Mental Health Summer Internship for High School Students

Department of Psychiatry

The Neuroscience and Mental Health Summer Internship is a unique program designed for high school students. The curriculum integrates informative lectures, seminars and workshops with daily mentorship time. The lectures concentrate on interesting research topics and/or clinical work together with interactive workshops. In addition, students will be matched with UMass faculty members to provide exposure to different aspects of the medical and research professions. The faculty advisors from prior year's programs have included surgeons, researchers and clinicians. Unfortunately, due to patient privacy considerations, program participants will not be permitted to observe or be involved directly in patient care. Selected students are expected to attend and actively participate in all the lectures, seminars and workshops as well as the mentorship hours (to be determined by the matched faculty member).

Location: University of Massachusetts Medical School, Worcester, MA

Dates: July 10, 2017 to July 21, 2017

(Five days a week and official hours are 9:30am-4:30pm. However, the hours are subject to change depending on the schedule of the student's assigned faculty advisor.)

<u>Eligibility</u>: Students who have attended high school during 2016-2017 and have interest in the medical profession (research and/or clinical) are encouraged to apply. Decisions will be made based on the GPA, application essays, and recommendation letters. Tuition is \$3000 for out of state applicants, but waived for students who reside in Massachusetts. The program does not provide housing; it is, therefore, the students' responsibility to arrange their accommodation if needed. We can provide recommendations for housing options that are within walking distance to the medical school campus.

<u>Application Process</u>: Send all applications (with the recommendation letters) in a single packet via email to the attention of Joseph M. Keating, MD, Department of Psychiatry, University of Massachusetts Medical School. For any questions, please email joseph.keating@umassmemorial.org. <u>Applications are due by June 2, 2017.</u>



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| Name: | Date of Birth: |
|--|-------------------|
| Address (Street/City/State/Zip): | · |
| Email/Phone: | |
| High School: Grade Point Average: Are you able to attend each day for the entire duration of the | e program? Ves No |
| If no, what conflicts do you have? | |
| List any academic or extracurricular activities and achievem | |

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| Briefly explain why you are interested in | participating in this program. | ٦ |
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| Vith your application, please submit TW rom a science teacher). | WO recommendations from a teacher (at least ON | Έ |
| | Date | |
| Signature: | Date: | |
| nature of Guardian: | Date: | |