

MD Camp 2020 Application

Thank you for your interest in MD Camp 2020! The application can be found below, feel free to email mdcamp.osu@gmail.com if you have any questions!

The application is due March 13th.

* Required

Personal Information

1. Name *

First and last name

2. Date of Birth *

Example: December 15, 2012

3. Home Address *

4. Phone number *

5. Gender *

Mark only one oval.

Female

Male

Prefer not to say

Other:

6. Race/Ethnicity *

Check all that apply.

- American Indian or Alaska Native
- Asian
- Black or African-American
- Hispanic or Latino
- Native Hawaiian or Pacific Islander
- White/Caucasian
- 2 or more races
- Other: _____

7. Name of High School *

8. If you attend a Columbus City School, are you identified as gifted and talented *

Mark only one oval.

- Yes
- No

9. Year of High School Graduation *

Mark only one oval.

- 2021
- 2022
- 2023

10. Cumulative GPA *

11. SAT score (if applicable)

12. ACT score (if applicable)

13. How did you hear about MD Camp? **Mark only one oval.*

- Guidance Counselor
- Science/Math Teacher
- OSU Medical Student
- OSUCOM Diversity and Inclusion Website
- I Know I Can Counselor
- Mentoring in Medicine High School Expo Day
- Other: _____

14. Name of Parent/Guardian 1 *

15. Highest Level of Education Completed by Parent/Guardian 1 **Mark only one oval.*

- Did not complete High School
- High School/GED
- Some College
- College Degree
- Graduate School or Professional School
- Unknown
- N/A

16. Name of Parent/Guardian 2 *

17. Highest Level of Education Completed by Parent/Guardian 2 **Mark only one oval.*

- Did not complete High School
- High School/GED
- Some College
- College Degree
- Graduate School or Professional School
- Unknown
- N/A

18. Please list extracurricular activities including awards received, leadership positions held *

19. Please list community service experience *

20. Please list work experience *

21. Please list hobbies and interests *

Financial Considerations

Please include all information about your financial situation.

22. Are you currently on free or reduced lunch? If yes, please upload official documentation as last name_first name.

Files submitted:

23. Are there any special financial circumstances that you would like to make us aware of? If yes, please explain how financial assistance in this program would benefit you personally. *

Essay Questions

24. Please compose an essay on the following topic: "Why I want to attend MD Camp." In your essay, please be sure to include what you hope to learn and experience during MD Camp. (500-word maximum) *

25. The role of a doctor is to help others in the community. Describe a meaningful experience (extracurricular activity, community service experience, or other) in which you helped others in your community. How was this experience meaningful or important to you? (250-word maximum) *

26. Describe the greatest challenge you have faced and how you worked to overcome that challenge. (250-word maximum) *

27. If you are not chosen for MD Camp, how will you continue to work towards your goals? (100-word maximum) *

28. Submit your resume

Files submitted:

Letters of Recommendation

(https://docs.google.com/forms/d/e/1FAIpQLScyAud2rG5CmkT5spAfXN-JSluL8BYfKHdpCQVwxEiUUCW5vg/viewform?usp=sf_link)

Send this link to TWO letter writers, one of whom must be a math/science teacher!

29. Name of Letter Writer #1 *

30. Name of Letter Writer #2 *

31. If there is anything else you wish to share with us regarding your application, please use this space to share that with us.

32. Please sign that the above information is true and is answered to the best of your knowledge. *

A copy of your responses will be emailed to null