

MAXIMIZING ACCESS TO RESEARCH CAREERS (MARC) PROGRAM

APPLICATION INSTRUCTIONS

*You must submit a complete application packet*

1. ☐ MARC Program Application: Complete a downloaded copy of the application, submit either via email or drop off a complete packet to GMCS322
2. ☐ Personal Statement: Elaborate on your background, interest in science/engineering, and long-range professional goals. The statement should be divided into (a) personal and family background, (b) research interests and (c) professional goals. No more than 1-2 pages (double-spaced, 12pt font).
3. ☐ Resume/CV: Provide an updated resume or curriculum vitae (CV)
4. ☐ Unofficial Transcript: Provide an unofficial transcript from all universities and colleges you attended and include in your complete application packet.
5. ☐ Financial Aid Records: Please use my.SDSU to access your financial aid information and provide current year financial aid award statement
6. ☐ SDSU Degree Evaluation: Provide a copy of your Degree Evaluation, which you can access via my.SDSU
7. ☐ References: Give copies of the recommendation forms to two (2) recommenders who are qualified to evaluate your scientific and academic background. Your recommenders can either fill out the recommendation form or they can write a letter of recommendation addressing the questions from the form. The confidential form and/or letter can be dropped off at GMCS322 or e-mailed to thelma.chavez@sdsu.edu
8. ☐ MARC Graduation Plan form: Complete a downloaded copy of this form or if you need more space, submit a similar document using excel (be sure it includes all the required information)

It is your responsibility to advise our office of any change in mailing address, telephone numbers or e-mail addresses.

Hand deliver or e-mail the complete application packet which includes your original application, personal statement, resume/cv, unofficial transcripts, financial aid summary, degree evaluation, two confidential references, and graduation plan to:

Thelma Chavez, MARC Program Coordinator

San Diego State University

College of Sciences, GMCS322

thelma.chavez@sdsu.edu

Questions about the program or application?

Contact our office via e-mail at thelma.chavez@sdsu.edu



MAXIMIZING ACCESS TO RESEARCH CAREERS (MARC) PROGRAM

Funded by the National Institutes of Health/National Institute of General Medical Sciences

| Date of Application: |  Student ID (beginning with 1): | Alternate ID (formerly RED ID): |
| --- | --- | --- |

### Personal Information

|

| First Name:       | Middle Name:       | Last Name:       |
| --- | --- | --- |
| Preferred Pronouns:  | Date of Birth:       | Contact Phone:(     )      -      |
| Permanent Mailing Address:       | @SDSU.EDU Student E-mail Address: | Other E-mail Address 2:      |
| The National Institutes of Health (NIH), the funding agency for our MARC program, stipulates that financial support is limited to students identifying as racial and ethnic minorities shown to be underrepresented in STEM, individuals with disabilities, and/or individuals from disadvantaged backgrounds. To identify your eligibility for funding, please answer the following questions: |
| Are you Hispanic (or Latino)? ☐ Yes ☐ No☐ Do not wish to provide  | What is your racial background? (check all that apply):☐ Black or African American☐ Asian☐ American Indian / Alaska Native    ☐ Native Hawaiian or other Pacific Islander☐ White☐ Other Not Stated Above      ☐ Do not wish to provide | Do you have a disability? Note, MARC works with SASC to advocate for accommodations.☐ Yes ☐ No☐ Do not wish to provideIf yes, which of the following categories describe your disability(ies):☐ Hearing☐ Visual☐ Mobility/Orthopedic Impairment☐ Other       |

 |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |
|

| ☐ U.S. Citizen or Noncitizen NationalNon-U.S. Citizen☐ With a Permanent U.S. Resident Visa ("Green Card")☐ With a Temporary U.S. Visa☐ Not Residing in the U.S. If not a U.S. citizen, of which country are you a citizen?  | If you selected Non-U.S. CitizenWith a Permanent U.S. Resident Visa ("Green Card") please submit a copy of your valid Permanent Resident Card (USCIS Form I-551) with this application | Please select any/all that apply:☐ Were or currently homeless☐ Were or currently in the foster care system☐ Were eligible for free or reduced lunch for 2+ years☐ No parents or legal guardians who completed a bachelor’s degree (1st generation college student)☐ Were or currently eligible for Federal Pell grant☐ Received support for Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) as a parent or child☐ Grew up in a rural area or low-income housing *These are the NIH’s specified criteria for disadvantaged backgrounds.* |
| --- | --- | --- |
| Father/Guardian  | Name:       | Occupation:       |
| Mother/Guardian | Name:       | Occupation:       |
| Languages Spoken at Home: |

 |

### Major Field of Study

| What is your major(s)?       | What is your minor(s)?       | Academic Level (based on units completed): SO ☐ JR ☐ SR ☐ |
| --- | --- | --- |
|  Estimated Date of Graduation:      **(Must graduate within 2 or 3 years from time of acceptance)** |

### Academic Information

## What is the highest degree you expect to obtain?

##  ☐ Bachelors

##  ☐ Masters

##  ☐ Ph.D.

##  ☐ M.D., O.D., D.O. or other professional degree

##  ☐ M.D./Ph.D.

| Community Colleges/Universities Attended | DatesAttended | Field of Study – Major | Overall GPA | Major GPA | Degree Earned | Date Degree Earned/Expected |
| --- | --- | --- | --- | --- | --- | --- |
|     |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |

| Number of Units Completed: | Number of Units in Progress: |
| --- | --- |
| Please provide your major GPA:**(This can be obtained from the Major Requirements Section of your my.SDSU Degree Evaluation)**  | Please provide your overall GPA: |

### Science-related Work Experience (Previous and/or Current):

| **Employer:** |       |
| --- | --- |
| Supervisor/Research Mentor:  |       |
| Position: |       |
| Hrs/week: |       |
| Dates of Employment: |       |
| Description of Duties: |       |
|  |  |
| **Employer:** |       |
| Supervisor/Research Mentor: |       |
| Position: |       |
| Hrs/week: |       |
| Dates of Employment: |       |
| Description of Duties: |       |

### Present Employment

| **Employer:** |       |
| --- | --- |
| Supervisor: |  |
| Position:  |       |
| Telephone: | (     )      -      |
| Dates of Employment: |       |
| Hrs/week: |       |
| Monthly Salary: | $      .      |
| Description of Duties: |       |

### Research Experience

**Do you have any research experience? ☐** Yes **☐** No

Please describe your most recent research experience below:

| Title of research you worked on |       |
| --- | --- |
| A brief description of the research |  |
| Name of faculty/mentor you worked with |       |
| Start date |     |
| End date: |       |
| Hrs/week: |       |
| Is this a paid position?If yes, please provide the name of the agency (or individual) that funded the research: | ☐ Yes ☐ No |
| Description of Duties: |       |

\*if you have more than one research experience, be sure additional research experiences are noted in your resume/cv.

## Please list the top three (3) research areas that interest you (even if you are already conducting research, please list your top 3 areas of interest). Refer to SDSU department websites for more information on faculty research.

| 1. Research Area:        | Faculty Mentor:       |
| --- | --- |
| 2. Research Area:        | Faculty Mentor:       |
| 3. Research Area:        | Faculty Mentor:       |

### Financial Aid or Additional Student Financial Support Information*The MARC scholarship is funded by the National Institutes of Health, a federal agency. If you are receiving financial aid, the MARC program is required to report this scholarship to the Financial Aid and Scholarships Office, and your aid might be decreased based on your unmet need. This is a federally mandated policy that will affect any student receiving federal or state funding.*

## If you are not receiving financial aid or scholarships, initial here.

### List any/all professional presentations

| Author(s) | Presentation Title | Location & Date of Presentation |
| --- | --- | --- |
|       |       |       |
|       |       |       |

### List any/all publications on which you have authorship

| Author(s) | Publication Title | Journal Title & Date of Publication |
| --- | --- | --- |
|       |       |       |
|       |       |       |

### List any/all academic honors, scholarships and/or fellowships

| Award type | Institution | Inclusive Dates |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|       |       |       |

### List any/all memberships in scientific, professional and/or student organizations

| Organization | Membership Dates |
| --- | --- |
|  |  |
|         |        |
|        |        |

### Additional Information to Complete

| Briefly explain what you hope to gain by participating in the MARC Program?  |
| --- |
| Why do you feel you are a good candidate for the MARC Program?  |
| How do you think developing a diverse group of Ph.D. level scientists is important to scientific research?  |
| Please describe any cultural, social, or economic barriers you faced in your pursuit of higher education: |

**As an undergraduate, have you participated in any of the following programs? Please check all that apply:**

| ☐ BSCRIP/CIRM☐ CSU-LSAMP@SDSU☐ EOP☐ HPAO☐ ICAN☐ IMSD | ☐ MESA☐ Pre-MARC☐ PSP☐ STEM Pathways/Mentored Pathways☐ Webers Honors College☐ Another Program(s) Not Listed:       |
| --- | --- |

## How did you learn about the MARC program? (Please check all that apply):

##  ☐ Pre-MARC

##  ☐ Friend

##  ☐ Email ☐ Other CASA Programs (i.e., IMSD, PSP, etc.)

##  ☐ Instructor/Advisor/Faculty Mentor. Please list name of person:

##  ☐ MARC recruiting event. Please list event:

##  ☐ Other: Please specify:

## List two people from whom you have asked to complete confidential reference forms and/or letters of recommendation. At least ONE must come from a faculty member who knows your academic/research work.

## IT IS YOUR RESPONSIBILITY TO ENSURE THAT THESE LETTERS REACH THIS OFFICE.

| Referee name | Title | Email | Phone # |
| --- | --- | --- | --- |
|       |       |       |       |
|       |       |       |       |

I hereby certify that all information provided is accurate and complete. I understand that it is my responsibility to contact the MARC office to verify that my application is complete. The MARC Program has my permission to contact the admissions or registrar office for student record verifications. If selected into the program, I understand that providing false information is grounds for dismissal from the MARC program.

Name of Student

Signature of Student

Date

Hand deliver or e-mail the complete application packet which includes your original application, personal statement, resume/cv, unofficial transcripts, financial aid summary, degree evaluation, two confidential references, and graduation plan to:

Thelma Chavez, MARC Program Coordinator

San Diego State University

College of Sciences, GMCS322

thelma.chavez@sdsu.edu

Questions about the program or application?

Contact our office via e-mail at thelma.chavez@sdsu.edu