



Texas State University U-RISE Application Form

Application Instructions:

1. Please first review the U-RISE Applicant Information Package
2. Complete all sections of this Application Form.
3. Please also complete the self-assessment survey ([survey link here](#)) and Trainee Memorandum of Understanding (MOU) found at the end of this application form.
4. Have 2 Letters of Recommendation from Faculty members, at least one of which is from a U-RISE participating department; one is strongly encouraged to be from a summer research experience sent directly to Program Administration (uriseadmin@txstate.edu). Complete Section D. of this Application Form to identify who your letter writers will be.
5. Complete your Personal Statement in Section E of this form. Attach additional pages if required.
6. Please submit transcripts for all College-level classes taken since High School. Unofficial transcripts from Texas State are acceptable.
7. Please submit an updated Resume that highlights your academic and extra-curricular achievements as well as any additional qualifications or personal strengths that you would like to highlight to the U-RISE Admissions Committee.



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A. Contact Information

First Name:			
Last Name:			
Preferred Pronouns:			
Phone:		TXST ID#	
TXST Email:			
Alternate Email:			

B. Educational Information

Major:			
Minor:			
GPA:		Expected Graduation:	
Do you anticipate applying to graduate school?			
Proposed field of study for graduate school:			

C. Eligibility Information

To be eligible for this NIH-funded training program, participants must identify with groups that have been specified as underrepresented in biomedical, clinical, behavioral, and social sciences according to [NOT-OD-20-031](#). You can disclose this information to the Texas State U-RISE staff in one of two ways. (1) Complete the following section, selecting all groups with which you identify. (2) Privately disclose this information directly to Texas State U-RISE Administration (please contact uriseadmin@txstate.edu to arrange this).

Please note that you are not obligated to complete this section of this form. However, to be considered for this training program, you will need to justify your eligibility.



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<p>Ethnicity/Race – select all of the following groups with which you identify as part of your cultural or family heritage. You may choose more than one.</p>	<ul style="list-style-type: none"> ○ Black/African American ○ Hispanic/Latinx ○ American Indian or Alaska Native ○ Native Hawaiians or Other Pacific Islander ○ Asian ○ White/Caucasian ○ Other:
<p>Individuals from disadvantaged backgrounds, defined as those who meet <u>two or more</u> of the following criteria.</p> <p>Please select all of the following groups with which you identify. Detailed information including further definitions are hyperlinked within each criterion.</p>	<ul style="list-style-type: none"> ○ <u>First-generation college student: have/had no parents or legal guardians who completed a bachelor’s degree</u> ○ <u>Were or currently are eligible for Federal Pell grants</u> ○ Grew up in one of the following areas*: <ul style="list-style-type: none"> ○ <u>a U.S. rural area, as designated by the Health Resources and Services Administration (HRSA) Rural Health Grants Eligibility Analyzer,</u> <u>or</u> ○ <u>A Centers for Medicare and Medicaid Services-designated Low-Income and Health Professional Shortage Areas (Excel file download)</u> ○ <u>Were or currently are homeless, as defined by the McKinney-Vento Homeless Assistance Act</u> ○ <u>Were or currently are in the foster care system, as defined by the Administration for Children and Families</u> ○ <u>Were eligible for the Federal Free and Reduced Lunch Program for two or more years</u> ○ <u>Received support from the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) as a parent or child</u>



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Individuals with disabilities.

If you would like the U-RISE admissions committee to consider this eligibility criterion for your application, please contact Program Administration at uriseadmin@txstate.edu directly to discuss.

- Those with a physical or mental impairment that substantially limits one or more major life activities, as described in the [Americans with Disabilities Act of 1990, as amended.](#)

D. Letters of Recommendation:

Please provide information about your two letter writers. Have your letter writers submit their letters directly to Program Administration at uriseadmin@txstate.edu.

Faculty Member Name	Faculty Member Relationship to You

E. Personal Statements

For each of the following questions, please provide a paragraph that responds to the prompts:

- a. Describe your motivation for pursuing a career in biomedical research and the area(s) of research that most interest you.



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b. Please discuss any information that describes your resilience, persistence, passion for science, and/or your approach to challenges that you would like to share with the U-RISE Admissions Committee.

c. (optional) Is there anything occurring in your life that may make impact your ability to carry out your participation in the U-RISE program?