

Applicant & Academic Information

Thank you for your interest in the Minneapolis Heart Institute Foundation Research Internship. Please visit our [website](#) to review the details about the program before completing this application.

NOTE: If you would like to save your responses and return to the application at a later time, please ensure that cookies are enabled and return using the same computer and web browser. (A cookie is stored in your browser that remembers your survey responses.)

Please follow directions. Consider this part of the selection process.

The application deadline is **11:59 pm on January 15, 2019**. Incomplete applications and applications received after the deadline will not be considered. The next application deadline will be January 15, 2020.

1. Eligibility

1. Undergraduate or recent graduate from a four-year college. Preference will be given to those who have completed their junior year by the start of the research internship. Strong applicants who have completed their sophomore year, just graduated from college or are enrolled in a post-baccalaureate pre-med program will also be considered.
2. Must be enrolled in an accredited degree program in a medical or health related discipline.
3. GPA of 3.60 or above.
4. Applicants must be US citizens or have Permanent Resident status (be able to provide proof of employability through completion of the I-9 Form). The program welcomes students who come from disadvantaged backgrounds and/or who represent groups that are known to be underrepresented in health related sciences and medicine.
5. Must be able to complete 8-12 hours of independent, online CITI training (basic training required to participate in human subjects/clinical research) between March 15 and April 15.
6. Available to participate full-time (at least 40 hours per week) in the internship May 29 through August 16, 2019.

Do you meet these criteria?

- Yes, I meet these criteria.
- No, I do not.
- If no, please describe below:

2. Your name and CURRENT address:

First name

Last name

Preferred name (if other)

Address

City

State abbreviation (e.g., MN, CA, NY)

Zip

Phone

Email

3. As of the summer of this internship program, I will be a:

- Junior or rising junior (minimum of 60 credits completed)
- Senior or rising senior (minimum of 90 credits completed)
- BA/BS graduate (new grad or just one semester past graduation)
- Premedical post-baccalaureate student
- Masters degree student (premed or related field)

Other (please specify)

4. Undergraduate School Information

School name (full/official name)

School city

School state abbreviation (e.g., MN)

Major(s)

Minor(s)

Cumulative undergrad GPA (on a 4.0 scale)

Graduation (actual or expected) - format MM/YYYY
(06/2018, 12/2018, 05/2019)

5. Post-Baccalaureate or Graduate School Information

IF you are currently enrolled in (or just completed) a post-bacc premed program or a masters program, provide the information below.

(If this doesn't apply to you, skip to the next question.)

School name (full/official name)

School city

School state abbreviation (e.g., MN, NY, CA)

Degree (e.g., MS, MA, MPH)

Field (e.g., biology, epidemiology)

Cumulative GPA (on a 4.0 scale)

Graduation (actual or expected) - format MM/YYYY
(06/2018, 12/2018, 05/2019)

6. Have you applied to medical school?

- Yes
 No

If no, please indicate the year you plan to apply

7. Standardized test scores

If you took any of the following exams, please provide the information below (leave blank if not taken, or score not yet received):

- ACT composite score English + Math + Reading + Science (out of 36)
- SAT total score, reading + math (out of 1600)
- MCAT total score (centered at 500, ranging from 472 to 528)
- Future MCAT - expected exam month/year (format 01/2017)

Please note that an MCAT score is NOT required. In the appropriate box, enter your best estimate of the month and year you will take the exam.

ACT composite

SAT total

MCAT

MCAT future date

8. How did you hear about this internship?

- Internship posting at my college or university
- Email from an advisor or a group I belong to
- Information from an employee or someone affiliated with the Minneapolis Heart Institute Foundation, Minneapolis Heart Institute or Abbott Northwestern Hospital
- Former MHIF intern
- Web search results
- Social media - Facebook, LinkedIn, etc.
- Posting on another website (e.g., list of internship opportunities)
- Other

Please provide details:

Experience Section

Please describe TWO experiences that you have found valuable. Experiences might include:

- Work or volunteer experience in a clinical, patient care or residential setting.
- Work or volunteer experience with individuals who might encounter barriers based on their race, disability, gender/sexual identity, socioeconomic status, religious expression, age, national origin, ethnicity, or veteran status.
- Leadership experience.
- Teaching, tutoring or mentoring experience.
- Extensive involvement in other extracurricular activities (not already described above).

For each example, provide the following:

1. Estimate of hours completed *as of the date of this application* . Format your example as follows: Example 1 - 8 hrs/week x 52 weeks = 416 hours. Example 2 - 10 hrs/week x 1 semester = 150 hours. Do *not* include planned hours for the time period between this application and the internship period.
2. High-level detail on organization, role and responsibilities (full sentences not required). Example 1: ABC Hospital: Radiation oncology volunteer. Helped with filing records, arranging patient rooms, making deliveries and visiting with patients. Example 2: Women's Initiative for Self-Empowerment (Girls Getting Ahead in Leadership Program): mentor. Led small group activities with 30 Hmong and Somali immigrant and refugee girls (9-12th grade).
3. THEN describe why you chose this experience and/or what you learned about yourself / others / the world / your future profession.

Response limit per example (x2): 600 characters (including spaces), or around 85 words. You'll likely want to draft your answers elsewhere and copy-paste them into this application.

9. Experience 1

Time commitment

Organization, role, responsibilities

Learning

10. Experience 2

Time commitment

Organization, role, responsibilities

Learning

RESEARCH EXPERIENCE

Please describe any previous research experience you have, including studying research methods, participating in research (including social science research, bench research, data collection, data analysis, etc) or publishing/presenting research. Please describe the type of research and research methods.

Response limit: 600 characters (including spaces), or around 85 words.

11. Research experience

Time commitment

Research topic and organization

Responsibilities

EMPLOYMENT EXPERIENCE

Please describe your prior paid work experience. Include your role, how you took direction and what teamwork was required.

Response limit: 600 characters (including spaces), or around 85 words.

12. Employment experience 1

Time commitment

Company and your role

Direction and teamwork

13. Employment experience 2

Time commitment

Company and your role

Direction and teamwork

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Short Essay Section

SHORT ESSAY QUESTIONS - GENERAL

Answer the following three questions based on your own, individual, personal experiences and with concrete examples of real-world choices.

Response limit: 500 characters (including spaces), or around 70 words. You'll likely want to draft your answers elsewhere and copy-paste them into this application.

14. Describe a time when you took initiative to get a job done. What did you do? What was the outcome?

15. Describe a situation where you had to learn quickly. How did you accelerate your learning? What did you observe about your learning style?

16. Over the years, what have you learned about yourself that needed improvement? What changes have you made based on that insight?

TECHNICAL QUESTIONS

During your internship you will be working with Excel to track, organize and analyze data. While you will develop these skills over the summer, please indicate your current level of experience with the following research tools.

17. Excel: You will use Excel to enter and organize data, perform calculations, analyze data sets, and create charts and tables. **FIRST**, rate your level of experience with Excel. **SECOND**, provide specific details on your experience and features you have used.

1 = Very little, but I can learn.

2 = I have some experience but would need some support and training.

3 = I have a solid working knowledge.

4 = I'm very proficient.

18. By the end of the program, interns will have demonstrated the skills listed below. Prior experience is beneficial, but we'll work with you to develop these skills! Describe any related experience you have in these areas:

- Data dictionaries: Ensure that the criteria for entered data will be clear and replicable to others.
- Data organization and version control: Maintaining directory and file structure per guidelines.
- Reporting and communication: Participating in weekly stand-ups to convey revisions, progress, and challenges pertinent to data management and analyses.
- Data verification: Check that data is entered correctly and that there are no transcription errors.
- Data presentation: Create charts and graphs that present data clearly.

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Writing Sample & Motivation Statement

WRITING SAMPLE

Read the article: "Electronic health records to facilitate clinical research" by Martin R. Cowie et al. published in Clinical Research in Cardiology (first published online August 24, 2016).

The full-text article is available for free online at <http://rdcu.be/nTuZ>.

FIRST, briefly summarize the article. SECOND, from your own reflection, comment on how this information might affect research and patient care during your career as a physician. Be sure to include a strong thesis statement.

Response limit: 1,400 characters (including spaces), or around 200 words. You'll likely want to draft your answer elsewhere and copy-paste it into this application.

19. Enter your summary and reflection below.

MOTIVATION STATEMENT

Write a personal statement of not more than 3,500 characters (with spaces), which is around 500 words. You'll likely want to draft your answer elsewhere and copy-paste it into this application.

Topic areas you might address:

- Why are you pursuing a career in medicine?
- What makes you an excellent candidate to become a physician?
- Why do you believe you have what it takes to succeed?
- What experiences have you had that helped confirm your career path?
- What do you feel our selection committee should know about you that is not included elsewhere in your application?
- Are there any elements of your application that need further explanation or elaboration?
- How do you see this internship experience supporting your academic/career goals?
- What sets you apart from other candidates (strengths, skills or background) and what unique characteristics would you bring to the program?
- Why are you interested in the MHIF research internship specifically?

20. Enter your motivation statement below.

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Legal Statement

21. Legal Statement

I certify that I have given true, accurate and complete information in this application to the best of my knowledge. I understand that any false information or omissions may be grounds for rejection of my application or dismissal if I am accepted for this internship program.

I understand that if I am offered an internship, I will be required to produce original documents verifying my identity and authorization to work in the United States, in compliance with federal law. Upon acceptance of an internship offer, I will also submit documentation to verify that I have met the immunization requirements established by Abbott Northwestern Hospital.

I also understand that candidates who are hired will need to authorize MHIF to conduct a background study and receive clearance from the Minnesota Department of Human Services.

Yes

No

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Voluntary Self-Identification Information

Minneapolis Heart Institute Foundation affirms our social, moral and legal commitment to non-discrimination through equal employment opportunity. We comply with the letter and spirit of applicable laws prohibiting employment discrimination on the basis of race, color, religion, sex, age, national origin, sexual orientation, disability or other such protected classes as may be defined by law. MHIF is an EEO/Affirmative Action employer.

We regard diversity in the internship program as an important factor in providing a rich learning environment for participants.

We are committed to providing research opportunities for individuals from backgrounds underrepresented in biomedical science, including individuals from disadvantaged backgrounds, individuals from underrepresented racial and ethnic groups, and individuals with disabilities. We believe providing such research opportunities will significantly contribute to a diverse research workforce in the future.

Providing the information below is optional. Accuracy of information provided is important, however, so providing inaccurate information will disqualify candidates from further consideration in the selection process. All information will be considered confidential.

22. Gender:

Female

Male

Other

23. **Race/ethnic origin** (you may choose more than one):

- Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, The Philippine Islands, Thailand and Vietnam.
- American Indian or Alaska Native:** A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- Black or African American:** A person having origins in any of the Black racial groups of Africa.
- Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture of origin, regardless of race.
- Native Hawaiian or other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White:** A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- I prefer not to answer this.

24. **Disability status:** The Americans with Disabilities Act of 1990 protects individuals with disabilities, defined as those with a physical or mental impairment that substantially limits one or more major life activities. Please choose one of the answers below:

- Yes, I have a disability.
- No, I don't have a disability.
- I don't wish to answer.

25. Disadvantaged background - rural residence:

If you did NOT live in a rural area during high school, please leave this question blank and go to the next question.

The National Institutes of Health (NIH) promotes diversity in biomedical research, in part, by supporting research opportunities for individuals who come from a social, cultural, or educational environment such as that found in certain rural or inner-city environments that have demonstrably and recently directly inhibited the individual from obtaining the knowledge, skills, and abilities necessary to develop and participate in a research career.

For the purpose of this application, please consider the place you lived during the majority of your high school education (grades 9-12).

If you lived during high school in an area you believe meets the RURAL criteria, please visit <https://www.ruralhealthinfo.org/am-i-rural>. Enter your address and click on the Continue button. Click on the Create Street Address Report button. Review the answers on that page.

To meet this criteria, you must provide the information below and provide your rural address in the comment box below. Providing inaccurate information will disqualify candidates from further consideration in the selection process.

	Yes	No / Not Applicable
CMS rural	<input type="radio"/>	<input type="radio"/>
FORHP rural	<input type="radio"/>	<input type="radio"/>
Primary care shortage	<input type="radio"/>	<input type="radio"/>
Mental health shortage	<input type="radio"/>	<input type="radio"/>
Medically underserved area	<input type="radio"/>	<input type="radio"/>
Medically underserved population	<input type="radio"/>	<input type="radio"/>

IF RURAL, provide your home address during high school here (street address, city, state, zip). If not, leave this field blank.

26. Disadvantaged background - inner-city residence:

If you did NOT live in an inner-city area during high school, leave this question blank and go to the next question.

See the NIH criteria on inner-city residence in the previous question. For the purpose of this application, please consider the place you lived during the majority of your high school education (grades 9-12).

If you lived during high school in an area you believe meets the INNER-CITY criteria, please visit <https://factfinder.census.gov>. In the box under Community Facts, enter the zip code of your primary residence during high school and click Go. Click on the Poverty box. Generally we would consider a poverty level of 30% or more to be indicative of an inner-city environment.

To meet this criteria, provide the zip code of your home address during high school AND the poverty level into the Additional Details box below. If you were not an urban resident, leave this question blank.

- Yes, 30%+ individuals below poverty level.
- Just under that, 25%+ individuals below poverty level but <30%.
- Not applicable to me.

If yes, enter your home zip code during high school AND the exact poverty level cited at census.gov here:

27. Disadvantaged background - low income:

The NIH also promotes research opportunities for individuals who come from a family with an annual income below established low-income thresholds. These thresholds are based on family size, published by the U.S. Bureau of the Census; adjusted annually for changes in the Consumer Price Index; and adjusted by the Secretary for use in all health professions programs. The Secretary periodically publishes these income levels at HHS - Poverty Guidelines, Research, and Measurement (<http://aspe.hhs.gov/poverty/index.cfm>).

To meet this criteria, you must be able to demonstrate that you have (a) qualified for Federal assistance programs for the disadvantaged, (b) have received any of the following student loans: Health Professions Student Loans (HPSL), Loans for Disadvantaged Student Program, or (c) who have received scholarships from the U.S. Department of Health and Human Services under the Scholarship for Individuals with Exceptional Financial Need.

- Yes, I can document that I qualified for the assistance, loans or scholarships listed.
- No, I do not meet that criterion.

28. Military affiliation: Some supporters of the internship program are also interested in supporting U.S. military members and their families. Are you or a member of your family a current or former member of the U.S. military?

- I am/was.
- An immediate family member is/was (parent, sibling).
- I do not have a close military affiliation.

Provide service branch and years

29. First-generation status: For the purposes of this application, we define a first-generation college student as "neither parent having received a four-year college degree."

- Yes, I am a first-generation college student.
- No, I am not a first-generation college student.

30. Cultural or language diversity comments: If your background (identity, family background, language skills, knowledge or experiences) would position you to provide culturally responsive care, please comment on that here.

31. OPTIONAL additional diversity comments: We value diversity in the internship program. EXCLUDING the factors already specified earlier in this application, you may add comments here about any additional diversity-related characteristics in your background. Please relate how these factors have influenced your goals or may impact your career in medicine.

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Alternate Contact & Referral Information

32. PARENT name(s) and your PERMANENT address:

Parent(s)

Address 1

Address 2

City

State abbreviation (e.g., MN)

Zip

Email

Phone

Alt. Phone

33. High school information:

School Name

City

State Abbreviation (e.g., MN)

Graduation Year

34. Optional: If someone affiliated with Minneapolis Heart Institute Foundation (including Allina Health, Abbott Northwestern Hospital and Minneapolis Heart Institute) has referred you to this program, provide his/her contact information below. The information will be used to facilitate communication.

Name

Organization

Email

Relationship

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Resume

CRITICAL FINAL STEP!

35. Upload your resume

- Your resume is a required part of the application
- Please upload a one-page resume
- The file may be PDF or Word

Choose File

No file chosen