UNIVERSITY of CALIFORNIA, SAN DIEGO
SCHOOL OF MEDICINE

Application Cover Sheet
Health Professions Exposure & Recruitment Program (HPREP)

NAME: _____

ADDRESS: _____

_____

PHONE NUMBER:_____

EMAIL ADDRESS: _____

HIGH SCHOOL: _____

AGE: _____

WHO LIVES IN YOUR HOME? _____

_____

_____

WHAT IS YOUR RACE/ETHNICITY? You may decline to answer this question, if you wish. You may also choose list multiple races/ethnicities.

_____

_____

WHAT LANGUAGE(S) DO YOU SPEAK AT HOME? _____

_____

DO YOU PLAN TO GO TO COLLEGE? IF SO, WHAT COLLEGE WOULD YOU MOST LIKE TO ATTEND?

_____

OFFICE OF DIVERSITY AND COMMUNITY PARTNERSHIPS
9500 GILMAN DRIVE, LA JOLLA, CALIFORNIA 92093-0606 Telephone (858) 534-3700 Fax (858) 534-8556

DO YOU HAVE FRIENDS, FAMILY MEMBERS OR OTHER MENTORS WHO ARE MEDICAL PROFESSIONALS? IF SO, WHO?

_____

_____

_____

_____

APPROXIMATE FAMILY INCOME
You may decline to answer this, if you wish.

- ❏ Less than $15,000 per year
- ❏ Between $15,000 and $29,999 per year
- ❏ Between $30,000 and $44,999 per year
- ❏ Between $50,000 and $64,999 per year
- ❏ Between $65,000 and $80,000 per year
- ❏ More than $80,000 per year
- ❏ Decline to answer

MOTHER'S HIGHEST LEVEL OF EDUCATION (SELECT ONE)
You may decline to answer this, if you wish.

- ❏ Did not attend high school
- ❏ Attended some high school
- ❏ Completed high school
- ❏ Attended trade school
- ❏ Completed trade school
- ❏ Attended Community College
- ❏ Completed Community College (A.A. or A.S. degree)
- ❏ Attended 4-year university
- ❏ Completed 4-year university (B.A. or B.S. degree)
- ❏ Attended graduate school
- ❏ Completed graduate school (M.A., M.S., Ph.D., M.D., or other degree)
- ❏ Other _____
- ❏ Decline to answer

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FATHER'S HIGHEST LEVEL OF EDUCATION (SELECT ONE)
You may decline to answer this, if you wish.

- ❏ Did not attend high school
- ❏ Attended some high school
- ❏ Completed high school
- ❏ Attended trade school
- ❏ Completed trade school
- ❏ Attended Community College
- ❏ Completed Community College (A.A. or A.S. degree)
- ❏ Attended 4-year university
- ❏ Completed 4-year university (B.A. or B.S. degree)
- ❏ Attended graduate school
- ❏ Completed graduate school (M.A., M.S., Ph.D., M.D., or other degree)
- ❏ Other _____
- ❏ Decline to answer

Your completed packet must include:

_____ **Personal Statement**

_____ **Letter of Recommendation**

_____ **Transcript**

_____ **Application Cover Sheet**

Please complete application and submit by August 1st, 2018

Email to: ucsdhprep@gmail.com

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