

Summer Training in Academic Research

2025 Teacher Application

| APPLICANT INFORMATION | | | | | | | | |
|--|----|-------------------|------------------|---------------------------------------|------------|--------------|--|--|
| Last name: | | | First name: | | | Middle name: | | |
| Street address: | | | | Apartment/unit: | | | | |
| City: | | | State: | State: | | Zip: | | |
| Phone: | | | | Personal E-mail address (non-school): | | | | |
| Date of birth: | | | Age on June | Age on June 23, 2025: | | | | |
| Gender: | | | Race/ethnicity*: | | | | | |
| As the NIH limits participation in this program to U.S. citizens, please indicate your citizenship status below: | | | | | | | | |
| Yes, I am a U.S. citizen. | | | | | | | | |
| No, I am not a U.S. citizen. | | | | | | | | |
| * Participation in this program is not restricted by race or ethnicity; the NIH requires that we ask for this information. | | | | | | | | |
| EDUCATION* | | | | | | | | |
| High school: | | | City, state: | | | | | |
| From | То | Did you graduate? | YES | NO \square | | | | |
| College: | | | City, state: | | | | | |
| From | То | Did you graduate? | YES | NO 🗌 | Degree: | | | |
| Other: | | | City, state: | | | | | |
| From | То | Did you graduate? | YES | NO 🗆 | Degree(s): | | | |
| * Please include a current curriculum vitae with your application. | | | | | | | | |
| REFERENCES* | | | | | | | | |
| Full name: | | | | Relationship: | | | | |
| Institution: | | Phone | | | | | | |
| Address: | | | | Email: | Email: | | | |
| | | | | | | | | |
| Full name: | | Relationship: | | | | | | |
| Institution: | | | | Phone | Phone | | | |
| Address: | | Email: | Email: | | | | | |

* Each of these individuals should be asked to supply a letter of support to be included with your application. Please ask them to email the letters to dukestarprogram@duke.edu.

| CURRENT AND/OR PREVIOUS EMPLOYMENT, IF APPLICABLE* | | | | | | |
|---|------------------------|-------------|--|--|--|--|
| Company: | | Phone | | | | |
| Address: | | Supervisor: | | | | |
| Job title: | | | | | | |
| Responsibilities: | | | | | | |
| Start & End Dates: | Reason for leaving: | | | | | |
| May we contact your previous supervisor for a reference? YES NO | | | | | | |
| Company: | | Phone | | | | |
| Address: | | Supervisor: | | | | |
| Job title: | | | | | | |
| Responsibilities: | | | | | | |
| Start & End Dates: | Reason for leaving: | | | | | |
| May we contact your previous superv | visor for a reference? | NO 🗆 | | | | |
| * Include additional pages as needed. | | | | | | |
| VOLUNTEER EXPERIENCE, IF APPLICABLE* | | | | | | |
| Organization | | Phone | | | | |
| Address | | Supervisor | | | | |
| Responsibilities | | | | | | |
| Start & End Dates: | | | | | | |
| May we contact this organization for | a reference? YES | NO 🗆 | | | | |
| Organization | | Phone | | | | |
| Address | | Supervisor | | | | |
| Responsibilities | | | | | | |
| Start & End | | | | | | |
| Dates: | | | | | | |
| Dates: May we contact this organization for | a reference? YES | NO 🗆 | | | | |

* Include additional pages as needed.

Please provide an essay on the following topic: "What I want to be, and how I'm going to make it happen" (300–500 words).

APPLICATION CHECKLIST

Note: Items 1–3 below should be emailed from the applicant to $\underline{dukestarprogram@duke.edu}$. Item 4 should be emailed by each letter writer to $\underline{dukestarprogram@duke.edu}$.

| 1. | Completed application |
|----|--|
| 2. | Current curriculum vitae |
| 3. | Essay (300–500 word count) |
| 4. | Two letters of support provided by non-relatives |

Learn more about the program at:

https://www.dcri.org/education/dukes-star-program/