



School of Pharmacy
UNIVERSITY OF WISCONSIN-MADISON

Pharmacy Summer Program

2017 Program Dates: August 2 -5, 2017

The Pharmacy Summer Program (PSP) is a four-day summer program for rising high school juniors and seniors interested in learning more about pharmacy careers and the UW-Madison Doctor of Pharmacy Program. The Pharmacy Summer Program targets rising high school juniors and seniors from traditionally underrepresented groups in the health science fields. Students who identify as African-American/Black, Native American/American Indian, Latino/a, Laotian, Vietnamese, Hmong, Cambodian are especially encouraged to apply.

Pharmacy Summer Program activities will include:

- Compounding lab demonstrations and activities (preparing personalized medications)
- Pharmacotherapy lab activities (treatment of disease/illness with medications)
- Tour different types of pharmacies
- Faculty and current student panels
- School of Pharmacy research opportunities
- Informational session on pharmacy school admissions

Eligibility requirements and criteria for acceptance:

- Students must have cumulative high school GPA of 3.0 or higher
- Must be rising high school junior or senior
- Must have a strong interest in science, the health sciences, and/or pharmacy

Participants will live in a university residence hall throughout the duration of the program with supervision from two live-in counselors. Housing and meals will be covered by the program. Transportation to and from the UW-Madison campus will not be provided by the program – participants are responsible for their own transportation to and from campus. Preference will be given to students who identify with traditionally underrepresented backgrounds in the health sciences.

UW-Madison School of Pharmacy
777 Highland Avenue
2220 Rennebohm Hall
Madison, WI 53705
www.pharmacy.wisc.edu



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2017 PHARMACY SUMMER PROGRAM APPLICATION

REQUIRED Application Materials:

- ✓ Completed application form
- ✓ Completed application essay
- ✓ Official high school transcript
- ✓ One letter of recommendation from a science teacher

All completed applications postmarked by **MARCH 17, 2017** will be deemed eligible. Please submit all application materials to:

ATTN: Susan Tran Degrand, Director of Outreach & Recruitment
Pharmacy Summer Program
UW-Madison School of Pharmacy
777 Highland Avenue, 2220 Rennebohm Hall
Madison, WI 53705

*Applications may be sent electronically to susan.degrand@wisc.edu.

Applicants will be notified by email of their acceptance into the Pharmacy Summer Program by MAY 5, 2017.

APPLICANT INFORMATION (please print or type):

NAME: _____

ADDRESS: _____

HOME PHONE: _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____

YEAR IN SCHOOL & EXPECTED GRADUATION YEAR: _____

NAME OF HIGH SCHOOL: _____

HIGH SCHOOL ADDRESS: _____

GENDER: _____ PREFERRED GENDER PRONOUNS: _____
(He/him, she/her, they/them, ze/hir, prefer not to respond)

WISCONSIN RESIDENT: ☐ Yes ☐ No State of residency _____

U.S. RESIDENT: ☐ Yes ☐ No Country of residency _____

Do you qualify for free or reduced lunch? ☐ Yes ☐ No

Are you a first generation college student? ☐ Yes ☐ No
(First generation college student = neither of your parents completed a degree at a 4-year institution)

UPBRINGING: ☐ Rural ☐ Urban ☐ Suburban

RACIAL BACKGROUND *(please check all that apply):*

- ☐ American Indian/Alaska Native, Tribal Affiliation: _____
☐ African American or Black ☐ Hmong ☐ Latino/a ☐ Other: _____
☐ Cambodian ☐ Native Hawaiian or Pacific Islander _____
☐ Caucasian or White ☐ Laotian ☐ Vietnamese

CUMULATIVE WEIGHTED HIGH SCHOOL GPA: _____ **UNWEIGHTED GPA:** _____

SCIENCE/MATH COURSES TAKEN OR WILL TAKE *(please check all that apply):*

COURSE NAME	TAKEN (Grade received?)	PLANNED (When?)	ADVANCED PLACEMENT (AP)?	INTERNATIONAL BACCALAUREATE (IB)?
Anatomy/Physiology				
Biology				
Chemistry				
Physical Science				
Physics				
Zoology				
Analysis/Pre-calculus				
Calculus				
Statistics				

☐ Please check here if your high school does not offer AP or IB course work.

HIGH SCHOOL AWARDS/HONORS:

AWARD/HONOR	BRIEF DESCRIPTION	DATE AWARDED

HIGH SCHOOL LEADERSHIP ROLES:

LEADERSHIP ROLE	BRIEF DESCRIPTION OF RESPONSIBILITIES	DATES OF INVOLVEMENT (MONTH/YEAR – MONTH/YEAR)	APPROXIMATE HOURS/WEEK

HIGH SCHOOL EXTRACURRICULAR ACTIVITIES:

ACTIVITY	BRIEF DESCRIPTION OF ACTIVITY	DATES OF INVOLVEMENT (MONTH/YEAR – MONTH/YEAR)	APPROXIMATE HOURS/WEEK

WORK AND/OR VOLUNTEER EXPERIENCES:

ACTIVITY	BRIEF DESCRIPTION OF ACTIVITY	DATES OF INVOLVEMENT (MONTH/YEAR – MONTH/YEAR)	APPROXIMATE HOURS/WEEK

*Please attach an additional sheet of paper if needed.

APPLICATION ESSAY QUESTIONS:

Please type your essay (in 500 words or less) on a separate sheet of paper. All essays must address the following questions.

- ✓ Why are you interested in participating in UW-Madison School of Pharmacy's Pharmacy Summer Program?
- ✓ What experience do you hope to gain from participating in this program?