



School of Medicine

Family Medicine

Mail code: FM
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Application for OAFP/FM Summer Research Internship

Today's Date: _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Primary phone: _____ E-mail: _____

Date available to start work: _____

Project Interest: (Check all that apply, see flyer for details)

- EHR Case Development and Evaluation for Disease Prevention and Management
- Examining Workforce Needs to Support Mental Health-Primary Care Integration
- Adults Access to Preventive Care Study
- Screening, Brief Intervention, and Referral to Treatment (SBIRT) Program
- CALM CARE Project
- Nurse Family Partnership (NFP) Contraceptive Study

The application deadline is **Friday, February 24, 2012**. Please return the following by mail, fax or e-mail to: Connie Yu, MHA, Director, Research Support Services, Department of Family Medicine, Mail Code: FM, Fax: (503) 494-2746, yuco@ohsu.edu:

- ✓ Completed application form
- ✓ Copy of Resume
- ✓ Personal statement (350 words or less) that describes your interest in the internship and how it relates to your overall career goals