



School of Medicine

Family Medicine

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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)

**Cutting-Edge Health Policy and Primary Care**

**Turning EHRs into Assets for Mental Health and Uniting Practice**

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The application deadline is **Tuesday, April 1, 2014**. Please return the following by e-mail to: Kam Pierce, Director, Research Support Services, Department of Family Medicine, [pierkam@ohsu.edu](mailto:pierkam@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