

UCSD Department of Radiation Medicine Visiting Elective Scholarship Application

Please note: Students must have applied to the UC San Diego Department of Radiation Medicine’s clinical elective program through the AAMC Visiting Student Application Service (VSAS) before the scholarship is processed.

Name:

Today’s Date:

Medical School:

Expected Graduation Date:

Date of Birth:

Email Address:

Contact Cell Phone Number:

What date (or dates) are you hoping to rotate at UCSD?

Students must come from a disadvantaged background as defined by the U.S. Department of Health and Human Services: “An individual from a disadvantaged background is defined as one who comes from an environment that has inhibited the individual from obtaining the knowledge, skill, and abilities required to enroll in and graduate from a health professions school or from a program providing education or training in an allied health profession.”

Please check all criteria that apply to you.

Demographics:

African American or Black
American Indian or Alaska Native
Asian/Asian American
Caucasian or White
Latino/a or Hispanic
Middle Eastern/South Asian

Native Hawaiian or Pacific Islander
South East Asian/Asian American (Vietnamese,
Cambodian, etc.)
LGBTQI+
Other
Prefer not to answer

Circumstances:

Worked 20 or more hours per week through und
Received Financial Assistance Program for the MCAT
First in your family to become a doctor
Attended a low-performing K-12 school
Received AMCAS Fee Waiver when applying to medical school

If disabled, which the following describes your disability/ies?

Hearing
Visual
Mobility
Mental/Cognitive
Mood/Emotional

UC San Diego

SCHOOL OF MEDICINE

Please provide an explanation to the statements below (300 word maximum per statement):

- a. Please explain how you qualify for this program based on one/or all of the criteria listed above.

- b. Please write a statement about your demonstrated interest in serving underserved communities.

- c. What are your goals for coming to UC San Diego?

Please email this completed application to v4hernandez@health.ucsd.edu in advance of your desired elective.

If you have questions about the scholarship, please contact Dr. James Murphy at j2murphy@health.ucsd.edu