Department of Emergency Medicine
UT Southwestern Medical Center
<u>Texas Emergency Medicine Research Associates Program</u>
(TEMRAP)
INITIAL APPLICATION

SESSION   FALL Semester 2018

(Circle ONE)   Credit   or   Shadow   (Circle one)   Female   or   Male

Name: _____   _____   _____

                Last name   First Name   Middle Initial

Are you able to commit to this course for 1 year or 2 semesters with or without credit?   YES   No

Last 4 Digits of SS#_____   Cell phone, (_____) _____-_____   DOB: _____

School Email: _____

GPA: _____ (send unofficial transcript)

<u>Application Requirements – submit these with your application</u>
- One Page Essay (500 word max) about why you want to be in this program
- Recommendation from UTD mentor (link for them to submit is on the TEMRAP web page)
- Updated immunization record – submit with application
  - NOTE: current TB test and FLU shot required each AUGUST- final credentialing will be dependent on submission of these by the date required. Missing that deadline for submission could result in dismissal from the program.
- UTD unofficial transcript

<u>Future Requirements – accepted students will be notified of these due dates</u>
- 10 Panel Drug Screen (Only required upon acceptance into the program; results due at orientation)
- UTSW TEMRAP Orientation-mandatory (CPR course review will be given)
  Orientation date will be shared with students accepted into the program.
- One- 4 hr. shift per week in the Emergency Department (Parkland or Clements)
- Light blue scrubs -See Syllabus

Local mailing address (where you may be contacted)

Street _____

City _____   State _____   Zip _____

Return completed application to: <u>Khushbakht.Bakhshi@Utsouthwestern.edu</u>
Completed application WITH required materials must be returned by APRIL 15th for Fall Semester

Version 5.0 GB