Summer Opportunities in Anatomy Research (SOAR)

Please complete this form to apply for the 2022 UNTHSC SOAR program for undergraduate students.

The deadline to submit the application is 11:59 PM (CDT) on March 1, 2022

* Required

1. Email *

2. Alternative e-mail address

Student Contact Information

3. First Name *

4. Middle Name / Initial

5. Last Name *

Education Information
6. Undergraduate Institution *


7. What type of degree are you currently seeking? *

Mark only one oval.

☐ Bachelor of Arts (BA)
☐ Bachelor of Science (BS)
☐ Other: ________________________________

8. Degree Major(s) *

Check all that apply.

☐ Anthropology
☐ Biochemistry
☐ Biology
☐ Chemistry
☐ Kinesiology
☐ Microbiology
☐ Pre-Medicine/Health Sciences Professions

Other: ☐ ________________________________
9. Degree Minor(s)

*Check all that apply.*

- [ ] Anthropology
- [ ] Biochemistry
- [ ] Biology
- [ ] Chemistry
- [ ] Kinesiology
- [ ] Microbiology
- [ ] Pre-Medicine/Health Sciences Professions

Other: ___

10. Anticipated Graduation Semester *

*Mark only one oval.*

- [ ] Summer
- [ ] Fall
- [ ] Spring

11. Anticipated Graduation Year *

*Mark only one oval.*

- [ ] 2022
- [ ] 2023
- [ ] 2024
- [ ] 2025
- [ ] 2026

Research and Career Interests
12. Which of the following career option(s) are you interested in pursuing after graduation? Choose as many as apply. *

*Check all that apply.*

- Graduate school (masters or doctoral degree)
- Professional school (medical or allied health degree)
- Career in academia (research)
- Career in academia (teaching)
- Career in industry or non-profit

Other: □ __________________________________________________________________________

13. Which of the following career field(s) are you interested in pursuing after graduation? Choose as many as apply. *

*Check all that apply.*

- Anatomical Sciences
- Anthropology
- Biological Sciences
- Biomedical Sciences
- Dentistry
- Medicine
- Nursing
- Pharmacy Studies
- Physician Assistant Studies
- Physical/Occupational Therapy
- Veterinary Medicine

Other: □ __________________________________________________________________________
14. Which of the following research fields are you interested in? Choose as many as apply.

*Check all that apply.*

- [ ] Anatomy education
- [ ] Craniofacial anatomy
- [ ] Dental evolution
- [ ] Functional morphology
- [ ] Gross anatomy
- [ ] Growth and ontogeny
- [ ] Histology
- [ ] Hominin evolution
- [ ] Human anatomical variation
- [ ] Human development
- [ ] Human disease
- [ ] Musculoskeletal biology
- [ ] Postcranial anatomy
- [ ] Primate evolution

Other: [ ] __________________________

15. If you are interested in working with a specific SOAR faculty mentor(s), please indicate so below. Choose as many as apply.

*Check all that apply.*

- [ ] Emma Handler, Ph.D.
- [ ] Lauren Gonzales, Ph.D.
- [ ] Matthew Kesterke, Ph.D.
- [ ] Scott Maddux, Ph.D.
- [ ] Rachel Menegaz, Ph.D.

Other: [ ] __________________________

Personal Statements
16. Please include a short (maximum 500 words) personal statement. How is research in the anatomical sciences related to your career goals, and how will this program help you to achieve those goals? * 


17. Describe any prior research experience you might have. This may include (but is not limited to) paid or volunteer work in a research lab, research internships, or coursework on research and experimental design. Note that no previous experience is required to participate in SOAR.


Demographic Data

Demographic Data Statement
The data collected in these questions will be used to identify long-term trends in SOAR applications, and to help develop mentoring and career resources for students. All demographics questions are optional. Your responses are confidential.

The SOAR program abides by the Diversity & Inclusion Statement of the American Association for Anatomy: “We are firmly committed to welcoming, developing and maintaining scientists and educators in a culture that embraces individuals with diverse life experiences. This includes engaging and nurturing a broad representation of individuals who value science and education, regardless of race, ethnicity, religion, national origin, mental or physical ability, age, gender identity or expression, or sexual orientation. In pursuit of advancing the anatomical sciences, we promote the values of equity, diversity, and inclusion.”
18. I identify as...

*Check all that apply.*

- Female/Woman
- Male/Man
- Non-binary
- Prefer not to specify

Other:  

19. My preferred pronouns are...

*Check all that apply.*

- she/her
- he/him
- they/their

Other:  

20. Do you identify as a member of the LGBTQ+ community?

*Check all that apply.*

- Yes
- No
- No, but I identify as an ally
- Prefer not to specify

Other:  

21. To which ethnic group or groups do you belong?

*Check all that apply.*

- [ ] African, African America, or Black
- [ ] American Indian or Native American
- [ ] Alaska Native
- [ ] Asian or Asian American
- [ ] Hispanic or Latinx
- [ ] Middle Eastern or North African
- [ ] Pacific Islander
- [ ] White, Caucasian, Anglo, European American; not Hispanic
- [ ] Prefer not to specify

Other: __________________________

22. Are you a currently serving or a veteran of the US military?

*Mark only one oval.*

- [ ] Active duty
- [ ] Veteran
- [ ] Reserve
- [ ] National Guard
- [ ] Non-military
- [ ] Prefer not to specify

Other: __________________________

23. Do you live with a disability?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Prefer not to specify
24. What is the highest level of education held by one or both of your parents?

*Mark only one oval.*

- [ ] No high school diploma
- [ ] High school diploma or GED
- [ ] Some college but no college degree
- [ ] Associates degree or other 2-year degree
- [ ] Bachelors degree or other 4-year degree
- [ ] Masters degree
- [ ] Doctoral degree (Ph.D., M.D., D.O., J.D., etc.)
- [ ] Prefer not to specify
25. Current US State/Territory of Residence

*Mark only one oval.*

- [ ] Alabama (AL)
- [ ] Alaska (AK)
- [ ] American Samoa (AS)
- [ ] Arizona (AZ)
- [ ] Arkansas (AR)
- [ ] California (CA)
- [ ] Colorado (CO)
- [ ] Connecticut (CT)
- [ ] Delaware (DE)
- [ ] District of Columbia (DC)
- [ ] Florida (FL)
- [ ] Georgia (GA)
- [ ] Guam (GU)
- [ ] Hawaii (HI)
- [ ] Idaho (ID)
- [ ] Illinois (IL)
- [ ] Indiana (IN)
- [ ] Iowa (IA)
- [ ] Kansas (KS)
- [ ] Kentucky (KY)
- [ ] Louisiana (LA)
- [ ] Maine (ME)
- [ ] Maryland (MD)
- [ ] Massachusetts (MA)
- [ ] Michigan (MI)
- [ ] Minnesota (MN)
- [ ] Mississippi (MS)
- [ ] Missouri (MO)
- [ ] Montana (MT)
- [ ] Nebraska (NE)
26. I am a...

*Mark only one oval.*

- [ ] US Citizen
- [ ] US National
- [ ] US Permanent Resident
- [ ] DACA holder (Delayed Action for Childhood Arrivals)
- [ ] None of the above
- [ ] Prefer not to specify
- [ ] Other: ____________________________

27. Due to covid-19, we are exploring multiple options for the structure of the SOAR 2022 program. Which of the following would you be willing to participate in? Check all that apply.

*Check all that apply.*

- [ ] On-campus/residential (Fort Worth, Texas)
- [ ] Hybrid (on campus and virtual)
- [ ] Virtual (remote from your current city of residence)
- Other: [ ] ____________________________

28. How did you find out about the SOAR program?

*Check all that apply.*

- [ ] Through a faculty member or advisor
- [ ] Through my university, department, or major
- [ ] Through another student
- [ ] Through social media (e.g. Facebook, Twitter, etc.)
- [ ] Through the American Association for Anatomy website
- [ ] Through the UNTHSC or Center for Anatomical Sciences website
- Other: [ ] ____________________________
<table>
<thead>
<tr>
<th>Faculty Letter of Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please provide the contact information for a letter of recommendation from a faculty member.</td>
</tr>
<tr>
<td>Please note that we cannot accept recommendations from staff members or graduate student instructors/TAs.</td>
</tr>
</tbody>
</table>

29. Faculty Name *

30. Faculty Email Address *

SOAR will request your letter of recommendation directly from the faculty member listed.
Please do not send the letter in advance.

Letters of recommendation will only be requested if deemed necessary by the SOAR committee.

<table>
<thead>
<tr>
<th>Required Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please include the following required materials with your application. You can upload them using this form, or mail them to the following physical address:</td>
</tr>
<tr>
<td>SOAR Program Applications</td>
</tr>
<tr>
<td>c/o Dr. Rachel Menegaz</td>
</tr>
<tr>
<td>Center for Anatomical Sciences</td>
</tr>
<tr>
<td>University of North Texas Health Science Center</td>
</tr>
<tr>
<td>3500 Camp Bowie Blvd.</td>
</tr>
<tr>
<td>Fort Worth, Texas 76107</td>
</tr>
</tbody>
</table>

31. Curriculum Vitae or Resume
Files submitted:

32. Current Transcript (Official or Unofficial)
Files submitted: