

Medical Student Global Health Scholarship Application (2023-2024) v. 1/3/24

Please visit the [Office of Global Health Education website](#) for a full description of requirements.

1. SUMMARY

Due dates:

-September 15 and February 1

-Letters of Reference (LOR's) due by September 22 and February 8

Eligibility

Individual UNC medical student applying to the UNC Medical School Global Health Travel Scholarship. Applicants must be in good academic standing and commit to a minimum of four weeks for a global health training program. Applicants require prior approval from the host site and course director, and written approval from the OGHE. Student groups are not eligible for this award. Applicants who have received the OGHE Global Health Scholarship in the past are not eligible to receive a second award for the same program. Funding for retroactive electives are not accepted. Awards range between \$500-\$2,000.

Applications and letters of recommendation should be sent to oghe@med.unc.edu in pdf format.

2. CONTACT INFORMATION

First
Name:

Last
Name:

UNC
Email:

UNC
PID:

Current class level (Example: MS1)

Anticipated graduation date: mm/yy

Proposed Program Start Date:

Proposed Program End Date:

Total Travel Dates
MM/DD/YY - MM/DD/YY
(Includes travel days returning
and arriving):

3. GLOBAL HEALTH ELECTIVE INFORMATION

Elective/Travel Location (City, Country/ies):

Languages Spoken On-site:

4. ADDITIONAL FUNDING

List other funding you have received, applied for, or that you plan to apply for in support of this project.

Organization/Department	Description/Additional Information	Amount (In US Dollars)	Status
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please add more rows if needed.

5. BUDGET

Please detail your budget below and be as specific as possible.

Item	Description/Explanation	Amount (In US Dollars)
ex: Airfare	RDU to London, UK	1130.00

1	
2	
3	
4	
5	
6	
7	
8	

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Total Funding Requested

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6. Budget Justification (optional)

Please provide any budget comments, justifications, or additional line items that do not fit in the budget matrix.

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7. ESSAY & SHORT ANSWER QUESTIONS (Limit 1,500 words)

Please describe the overall purpose and motivations for the proposed global health experience, AND address one of the options below relevant to the nature of your role and the nature of your experience.

1. **For research:** Project description; faculty support; funding needs; and plans for IRB approval.
2. **For public health-focused projects:** Project description; faculty support; funding needs and plans for IRB approval if any research involved.
3. **For clinically focused programs:** Anticipated patient-care responsibilities and supervision, and plans for scholarly activity and funding needs.



8. RATIONALE FOR CHOOSING SITE

[Empty rectangular box for text entry]

9. IDENTIFY AT LEAST 3 LEARNING OBJECTIVES:

[Empty rectangular box for text entry]

10. DESCRIBE ONSITE SUPERVISION APPROPRIATE TO YOUR LEVEL OF TRAINING

[Empty rectangular box for text entry]

11. DISCUSS LANGUAGE BARRIERS AND HOW YOU PLAN TO MITIGATE THEM

[Empty rectangular box for text entry]

12. SUSTAINABILITY

Discuss the likelihood of a continued relationship/partnership with this site for yourself or other trainees in subsequent years.

13. DESCRIBE YOUR GLOBAL HEALTH EXPERIENCE

For example, clinical experience, research, community health, any leadership role, and personal travel. If you are unsure of the specific dates, please provide your best estimate. List the dates starting with the most recent.

	Dates ex: 02/2015-04/2015	Description of Travel Research; Personal	Location/Organization Mexico City, Mexico/Universidad Nacional Autónoma de México
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>

14. SUPPLEMENTAL MATERIALS

Please add your CV / Resume as a PDF file using the following: "FIRST, LAST_CV" to your application email.

15. REFERENCES

This application requires two letters of reference.

One letter of reference from a SOM faculty (such as your academic advisor) that can speak to your character and academic achievements.

One letter of reference from your Faculty advisor for the elective (if not OGHE group program) or local supervisor

Both are due by September 22 (for September 15 application deadline) and February 8 (for February 1 deadline)

Please send the [LOR form](#) to your references and copy OGHE@med.unc.edu