

CORE Application

Date _____

First Name _____ Last Name _____

Preferred Name _____

Gender Identity _____

Address _____

City, State, Zip Code _____

Primary Phone _____

Secondary Phone _____

E-mail _____

Field of Study _____

CORE Schedule

Undergraduate students typically complete a one week CORE. Medical students and medical graduates typically complete a two week CORE. Please provide at least three dates when you would be available to participate in CORE.

First Choice _____

Second Choice _____

Third Choice _____

_____ If accepted, I can make a 1-2 week full-time commitment to CORE. (M-F, 8am – 5pm)

_____ If accepted, I would **not** be able to make a full-time commitment and would need the following exceptions:

Please email this form along with:

- **A current resume/curriculum vitae**
- **A paragraph about yourself** explaining family/geographic background, educational background, work experience, interest in HIV, professional goals, and primary motivations to participate in CORE. If you have specific areas of interest, please be sure to include these so we can design a curriculum that best meets your needs if you are accepted.

Email application, resume, and paragraph to Kelly Ross-Davis, KRD@uab.edu.

Healthcare is a Team Sport!