Student Information Survey, Cohort of 2018, UTRGV BMED program

Name:	UTRGV ID#:	Date:
1a. What is your current career goal? Please chec first choice, number 2 your second and so on.	k your top THREE and please	number them. Number 1 would be your
☐ MD, physician, any specialty ☐ MD-PhD, physician DND, naturopathic doctor ☐ PT/OT, physical their (BS, MS or PhD) ☐ DMD or DMS, dentist ☐ DVI biomedicine ☐ BS or MS, Lab scientist ☐ BS or M other, please list ☐ DVI	rapist or occupational therapist M, veterinarian PhD, scient MS degree, school teacher	PharmD, Pharmacist psychologist tist or researcher university professor of
1b. Please describe in 3-5 complete sentences whe choice.	y you are interested in the car	eer that you just checked as your top
2a. What medical specialty/ topic interests you monumber them. Number 1 would be your first choice	ost for a future career? Please e, number 2 your second and	check your top THREE and please so on.
□ cardiology □ dermatology □ endocrinology	pediatrics internal medi	cine \square general surgery \square primary care,
family medicine pharmacology psychology, o		
□ neurologist/neurosurgeon □ dentistry □ emer □ teaching □ Other, please list □		
2b. Please describe in 3-5 complete sentences who choice.	y you are interested in the spe	ecialty that you checked as your top

3. Name one disease or medical condit and briefly say why. (3-5 complete sen		nost interested in and wan	t to learn more about in great detail	
4. Currently courses in the BMED prog				
courses offered in Brownsville	Edinburg	☐ Harlingen. Please check	call that apply.	
5. We are discontinuing offering an accinstead of four. Would you be interested Brownsville campus?				
6. Is there anything specific that is of interest to you in connection to our biomedical program? Please let us know. Any questions or concerns, any suggestions etc. We love to hear your opinion! Please write down an email that you frequently check AND phone number that you can be reached at, so we can get back to you regarding any questions or concerns that you may have, including any updates regarding admission to our program.				
UTRGV Email: (Please print clearly)				
Personal Email: (Please print clearly)				
Phone number:				