



2026 High School Intern (HIP) Application

Page: 1 2 3 4 5

Dear Student,

Thank you for your interest in the Science and Health Education Partnership's High School Intern Program (HIP). Please complete the application to the best of your ability. We read each application very closely and look forward to getting to know you through your responses.

Applications are DUE **Sunday, February 8, 2026**.

The use of artificial intelligence (AI) is not allowed to complete your application and will lead to disqualification.

Personal Information

First Name *

Middle Name

Last Name *

Preferred Name *

The name you want people to call you in our program

Home Street Address *

City *

Zip Code *

Home Phone Number

####-####-####

Cellphone Number *

####-####-####

If you do not have a cellphone, just type in 000-000-0000

School email address *

Personal email address (this should be a non-school email. We are sometimes blocked from sending messages to school email addresses): *

My pronouns are... (select all that apply) *

- He/him/his Not listed
- She/her/hers They/them/theirs
- Prefer not to answer

Are you part of the College Track San Francisco program? *College Track is a college completion program serving students from low income communities who will be the first in their families to graduate from college.* *

Yes

No

High School *

Please select... 

Grade level *

11, current Junior

How did you find out about SEP's high school programs? Check all that apply.

- Teacher Boys and Girls Club
- School counselor YMCA
- Principal Booker T. Washington Community Center

<input type="checkbox"/> My parent/guardian	<input type="checkbox"/> Friendship House
<input type="checkbox"/> Someone who has done this program	<input type="checkbox"/> Collective Impact (Magic Zone)
<input type="checkbox"/> Flyer	<input type="checkbox"/> Web search
<input type="checkbox"/> College Track	<input type="checkbox"/> Filipino Community Center
<input type="checkbox"/> FYSCP (Foster Youth Services Coordinating Program)	<input type="checkbox"/> SFUSD African American Leadership Initiative (AALI)
<input type="checkbox"/> LYRIC (Lavender Youth Recreation and Information Center)	<input type="checkbox"/> SFUSD Refugee and Immigrant Solidarity in Education (RISE-SF)
<input type="checkbox"/> SFUSD Native Hawaiian & Pacific	<input type="checkbox"/> SFUSD African American Parent
<input type="checkbox"/> Islander Mātua Advisory Council (MAC)	Advisory Council
<input type="checkbox"/> SFUSD American Indian Program	<input type="checkbox"/> Other

Please select at least one value from the above section.

Next Page

[Contact Information](#)

2026 High School Intern (HIP) Application

Page: [1](#) **2** [3](#) [4](#) [5](#)

The questions on this page will not be used in the selection process, but are used for grant reporting purposes. UCSF does not use race, gender, sex, or other protected categories or proxies for protected categories in the selection process of our programs.

Gender *

- Male
- Female
- Genderqueer/non-binary
- Trans male/trans man
- Trans female/trans woman
- Not listed
- Prefer not to answer

Some of the following questions are about your family members and/or your household. Please provide as much information as possible. Ask someone if you don't know the answers.

Family Education

Parent/Guardian 1 *

Please select...

Parent/Guardian 1 highest level
of education *

Please select...

Was Parent/Guardian 1 educated in
the United States? *

Please select...

Parent/Guardian 2

Please select...

Parent/Guardian 2 highest level of education

Please select...

Was Parent/Guardian 2 educated in the United States?

Please select...

Do you have a sibling who has attended or is attending college? *

No Yes Prefer not to answer

Household Info

How many people live in your household (including yourself)?

How many are children/dependents (including yourself)?

Use the space below if you feel additional information about your household/living arrangements would be important to let us know (i.e. live with grandparents, joint custody, more than one household, recently moved, etc).

Do you or your family qualify for any of the following programs? *

<input type="checkbox"/> Low Income Home Energy Assistance Program (LIHEAP)	<input type="checkbox"/> Women, Infants, and Children (WIC)
<input type="checkbox"/> CalFresh/SNAP	<input type="checkbox"/> CalWORKs (TANF) or Tribal TANF
<input type="checkbox"/> Supplemental Security Income (SSI)	<input type="checkbox"/> Medi-Cal for Families (Healthy Families A&B)
<input type="checkbox"/> National School Lunch Program	<input type="checkbox"/> Bureau of Indian Affairs General Assistance
<input type="checkbox"/> Medicaid/Medi-Cal (under age 65)	<input type="checkbox"/> Earned Income Tax Credit
<input type="checkbox"/> Cash Assistance Programs for Immigrants	<input type="checkbox"/> I and/or my family do not qualify for any of these programs.
<input type="checkbox"/> Prefer not to answer	

Do you experience / have you experienced homelessness or housing insecurity? *

- Yes, currently
- Yes, in the past
- No
- Prefer not to answer

Are you or have you ever been in the foster care system? *

- Yes, currently
- Yes, in the past
- No
- Prefer not to answer

What languages do you speak? _____

English Proficiency _____

What is your English language proficiency?

	Fluent	Proficient	Beginner
English *	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you speak any of the following languages fluently?

	Fluent
Arabic	<input type="checkbox"/>
Cantonese	<input type="checkbox"/>
Farsi (Persian)	<input type="checkbox"/>
Filipino (Tagalog)	<input type="checkbox"/>
French	<input type="checkbox"/>
German	<input type="checkbox"/>
Hindi	<input type="checkbox"/>
Hmong	<input type="checkbox"/>

	Fluent
Italian	<input type="checkbox"/>
Japanese	<input type="checkbox"/>
Korean	<input type="checkbox"/>
Lao	<input type="checkbox"/>
Mandarin (Putonghua)	<input type="checkbox"/>
Mien	<input type="checkbox"/>
Portuguese	<input type="checkbox"/>
Punjabi	<input type="checkbox"/>
Russian	<input type="checkbox"/>
Spanish	<input type="checkbox"/>
Tongan	<input type="checkbox"/>
Urdu	<input type="checkbox"/>
Vietnamese	<input type="checkbox"/>
Other	<input type="checkbox"/>

What language(s) do you speak at home? *

What is your ethnicity? _____

Are you of Hispanic, Latino or Spanish Origin? *

- I don't know or prefer not to answer.
- No, not of Hispanic, Latino or Spanish origin
- Yes, Mexican, Mexican American, Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, another Hispanic, Latino, or Spanish origin (for example, Salvadorian, Dominican, Columbian, Guatemalan, Spaniard, Ecuadorian, etc.)

What is your race? _____

<input type="checkbox"/> African-American/Black	<input type="checkbox"/> American-Indian/Alaska Native
<input type="checkbox"/> Bhutanese/Bhutanese-American	<input type="checkbox"/> Burmese/Burmese-American
<input type="checkbox"/> Cambodian/Cambodian-American	<input type="checkbox"/> Chinese/Chinese-American
<input type="checkbox"/> East Indian/Pakistani	<input type="checkbox"/> Filipino/Filipino-American
<input type="checkbox"/> Hmong/Hmong-American	<input type="checkbox"/> Japanese/Japanese-American
<input type="checkbox"/> Korean/Korean-American	<input type="checkbox"/> Laotian/Laotian-American
This means your heritage is connected to the country of Laos in South-East Asia	
<input type="checkbox"/> Middle Eastern	<input type="checkbox"/> Pacific Islander
<input type="checkbox"/> Vietnamese/Vietnamese-American	<input type="checkbox"/> White/Caucasian
<input type="checkbox"/> I don't know or prefer not to answer	<input type="checkbox"/> None
<input type="checkbox"/> Other Asian	<input type="checkbox"/> Other

Please select at least one value from the race section.

Disability Status _____

Do you have a disability? *

Yes
 No
 Do not wish to disclose

[Previous Page](#)

[Next Page](#)

[Contact Information](#)

2026 High School Intern (HIP) Application

Page: [1](#) [2](#) **3** [4](#) [5](#)

School History

List all the schools you have attended.

Elementary School

SFUSD Elementary School *

Please select...

[Add another elementary school](#)

Middle School

SFUSD Middle School *

Please select...

[Add another middle school](#)

High School

SFUSD High School *

Please select...

[Add another high school](#)

[Previous Page](#)

[Next Page](#)

Contact Information



2026 High School Intern (HIP) Application

Page: 1 2 3 4 5

Extracurricular Activities

Please list any activities that you have been or are currently involved in (i.e. school clubs, church, sports, work, caretaking, volunteering, community groups, etc.).

Include any STEM programs you are doing or have done. *

Please tell us more about one activity you participate in, a hobby, or something you like to do outside of school. Describe how you got involved and in what way your participation is meaningful to you. *

Tell us more about yourself

What would you choose for the theme song of your life and why? *

Tell us about three things that you're proud of and why. Aim for 100-300 words.

*Things to consider: People might be proud of many different things within themselves and their communities/families. Are you proud of your personal or academic growth? Do you have qualities that you admire within yourself? Why are these meaningful to you? **

Tell us about three things that are currently (or have been) challenging for you and why. Aim for 100-300 words.

*Things to consider: A challenge could be personal, or something you have faced in your community or school. Why are these challenges significant? What have you learned from those experiences? **

Describe a situation where you have taken on responsibility. What did you learn from this? Aim for 100-300 words.

*Things to consider: Responsibility can show up in our lives in different ways. How are you a responsible person? Do you hold responsibilities within your family or your community? Do you have a job with specific responsibilities? Do you have a role at school or in extracurricular activities where you have to be responsible? **

[Previous Page](#)

[Next Page](#)

[Contact Information](#)



2026 High School Intern (HIP) Application

Page: [1](#) [2](#) [3](#) [4](#) [5](#)

Reference _____

Please provide the contact information of an adult who can serve as your reference - this is not a letter of recommendation. We will contact them directly if additional information is needed.

Note: A family member or friend cannot serve as your reference.

Please make sure that the person you list below as reference is willing to be contacted by us and speak about your science or health interest.

Reference #1 (required) _____

Please provide the name of the person serving as your reference. **A reference is REQUIRED. Do not leave this section blank or type in N/A.**

Reference First Name *

Reference Last Name *

Reference Email Address *

Essay

Please write a brief* essay describing:

- Why you want to participate in this program.
- What about research and/or science is interesting to you.
- How you hope this experience prepares you for life after high school.
- How your access (or lack of access) to science experiences has influenced your interest in this program.

If applicable, please describe any social, cultural or educational barriers that have challenged your ability to pursue your personal and/or career goals.

****Please limit your essay to 500 words.****

A large, empty rectangular box with a thin black border, designed for the applicant to type their essay response. It occupies most of the page below the instructions.

Generative Artificial Intelligence (AI) is not allowed for the completion of this application. Please confirm below that you DID NOT use AI.

I verify that the responses in this application are my own work, and the use of artificial intelligence (AI) to generate content has not been used.

You must confirm you did not use AI in your application to submit.

Contact Information