

## Department of Medicine Trainee Survey

The University of Rochester, Department of Medicine, is committed to fostering interest among trainees interested in careers in medicine and scientific research. In efforts to best align research interests, we kindly request that those interested in research complete a brief survey prior to reaching out to potential faculty mentors.

Following completion of the intake form, we suggest that you email the faculty member of interest and attach the form for their review.

If you are unsure about who can help you match research interests, we suggest you reach out to one of our [research faculty delegates](#), as appropriate.

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**Trainee Name (First Name, Last Name):**

**Trainee Email (Please provide best email address for contacting you):**

**Please select one of the following.**

- Undergraduate Student
- Graduate Student
- Medical Student
- Resident
- Fellow
- Other:

**What year are you in training, if applicable? (e.g. Residents: PGY1, PGY2, PGY3)**

**Do you have previous research experience?**

Yes

No

**Please briefly describe any prior research experience.**

**What is the period of proposed research you are seeking?**

**What dates and times do you expect to be available?**

**What type of research would you be interested in getting involved in? Select all that apply.**

Basic Science

Clinical

Translational

Medical Education

Diversity, Equity and Inclusion

Others: \_\_\_\_\_

**Describe your area(s) of research interest.**

**What skills do you wish to develop during this experience?**

**What is your motivation to seek a research position? For Residents, are you applying for a Fellowship, and if so, in what area?**

**Are there specific faculty mentors with whom you would like to work? If so, please provide their full name.**

Send this form, along with your CV via email, to the faculty member of interests. If you are unsure about who can help you match research interests, we suggest you reach out to one of our [research faculty delegates](#), as appropriate.