BOBBIE CATES HICKS SMART PROGRAM APPLICATION 2026-27

The fillable parts of this document must be completed, and *original letters of recommendation, official transcripts, and ACT scores must be scanned, added to the file as a* ***single*** *pdf,* and E-mailed to krisclements@gmail.com.

Due: February 28, 2026

By 4:00PM

Additional information on the application process and training program can be found on the LSU Health Shreveport Research website: **https://research.lsuhs.edu/about/student-research-programs/smart-program/apply**

<u>Electronically-submitted</u> application (saved as <u>one</u> pdf) must include the following items:

- ❑ completed cover sheet
- ❑ completed and signed parental consent form
- ❑ small headshot photo of applicant
- ❑ applicant essays
- ❑ a copy of applicant's transcript
- ❑ a copy of applicant's ACT scores (if printed on transcript, then disregard)
- ❑ two letters of recommendation from among the following:
  - ❑ your high school principal or assistant principal
  - ❑ your high school counselor
  - ❑ one or two of your high school science teachers
    - ❑ Must address the following (Show this list to recommender.):
      - ❑ candidate for high school graduation May 2026.
      - ❑ completed biology, chemistry, and physics and/or completed or be enrolled in second year AP courses of the aforementioned sciences.
      - ❑ attained an ACT score of 28 or higher (composite or science area).
      - ❑ earned grades of A or B on all high school science coursework.
      - ❑ maintained exemplary attendance and behavior as verified by school officials.
      - ❑ demonstrated career interest in research, medicine, or biomedical engineering.

Hicks SMART Program Application Cover Sheet

Applicant's Name	
Home Address	
Applicant's Email Address	
Applicant's Cell Phone #	
Parent/Guardian Name(s)	
Parent/Guardian Email Address	
Parent/Guardian Cell Phone #'s	
High School Name, Address & Phone #	
School Counselor's Email	
Date of Birth	
Applicant's Photo	

Parent Consent Form:

After reading the Application Packet enclosures, I do hereby give consent to my child,

to participate in the HICKS SCIENCE AND MEDICINE ACADEMIC RESEARCH TRAINING (SMART) Program at LSU Health Shreveport should he/she be selected for participation in the program for the period of June 8, 2026 to July 24, 2026 and then early to mid-August until early May 2027.

Parent’s Signature and Date

Applicant Essays

1. Have you ever made a discovery that was exciting and new to you? How did it come about and what was it? Have you ever produced an idea or experiment that was new to everyone? If so, describe it and the circumstances surrounding the discovery. (25 pts.)

2. What special honor, awards, and recognition have you received because of your academic achievements or because of your participation in extracurricular and community activities? (10 pts.)

3. In what extracurricular activities have you participated during your high school career? Include school-related and community-related activities and the length of your participation in each. (15 pts.)

4. What do you consider your special skills and talents? (15 pts.)

5. What are your aspirations and goals? Include a statement that explains why you wish to be a participant in the SMART program. (35 pts.)