**H.E.L.P. COURSE – 2023 APPLICATION FORM**

 Health Emergencies in Large Populations

Johns Hopkins University Bloomberg School of Public Health

Winter Institute

January 9-20, 2023

**Admissions/application deadline**: The final application deadline is 12pm U.S. Eastern Time on December 2, 2022. However, H.E.L.P. applications are accepted on a rolling basis, and admissions may close earlier if the course capacity is reached.

Personal Information

Title: \_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: \_\_\_\_

 First M.I. Last Name

Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth (mm/dd/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Date of Birth is required of all students. SSN is required of all US citizens and US legal residents.)

What is your current work? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country of Legal Residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country of Citizenship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Mailing Address (please provide a **preferred** mailing address): 🞏 Home 🞏Work

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City State/Prov Zip/Postal Code

Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Personal cell phone: (+\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country Code/Number

Work Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street or PO Box City State/Prov Zip/Postal Code

Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\* Email is required to be a personal email address at which the applicant can be reached directly, not an organizational email address.*

Professional Experience (Start with current position)

 Employer Position/Title Activities Dates (mm/yyyy)

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Educational Background (Start with most recent university/college degree)

 School Area of Concentration Degree Year Received

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Affiliation (Check all that apply)

🞏 JHU Alumnus 🞏 JHU Employee 🞏 Attended Previous JHU short courses

Are you currently enrolled in a degree program at the Johns Hopkins University? Yes \_\_\_ No \_\_\_

 If Yes, which department and degree: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you currently enrolled in a degree program at another university? Yes \_\_\_ No \_\_\_

 If Yes, name of school and degree: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Needs: If you have special needs or required disability assistance, please notify the course coordinator via email at helpcourse.jhsph@gmail.com

How did you hear about the H.E.L.P. Course?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Why Do You Want to Attend the H.E.L.P. Course?** Please tell us in less than 500 words what work you have been doing and why you want to attend the H.E.L.P. course. Is related to your future career goals.

My Signature below certifies that:

* the information I have given in this application is correct.
* I understand that part of the HELP course includes recorded pre-course materials which must be completed before the live course begins and includes a short quiz. Failure to complete this required pre-course work will result in my removal from participation in the live sessions held from January 9-20.
* I understand that the January live sessions will be held on January 9-14 and January 17-20 (as January 16 is a JHU holiday) and commit to attend class on these dates.
* **I also understand that the January live sessions of the virtual HELP course is a fulltime course and that I should not plan any work or other activities which will conflict with my active participation in class time, which runs from 9:30am – 4pm EST (New York time).**
* I understand the attendance stipulations required to earn a certificate of completion from the HELP course. I am allowed a maximum of 4 live session absences. Any more absences will prevent me from earning this certificate of completion.
* If I am taking the HELP course for academic credit, I understand that the JHSPH student academic ethics code applies to my work.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF REGISTRATION

\_\_\_ Academic Credits (5): US$6,350

\_\_\_ Non-Credit: US$1,500 (January 2023)

PAYMENT

Non-Refundable Deposit Enclosed: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (US$150 minimum)

Balance Due: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by noon EST December 9, 2022 or at time of registration thereafter

Bank Transfer

M & T Bank
One M&T Plaza
Buffalo, NY 14203
SWIFT Code: MANTUS33INT
Transit/Routing/ABA# 022000046
Account number: 970370230
Type of Account: Checking
CHIPS ABA number IF remitter requests it: 0555​

*\* Please include a cover letter with the transfer that has your name and a note that payment is for the HELP course.​​ Once the transfer is initiated, please send a copy of the transfer slip along with your application. The transfer must be received by Hopkins prior to registration.*

Check

Johns Hopkins University
Bloomberg School of Public Health
615 N. Wolfe St, Suite W1101
Baltimore, MD 21205

*\* Please make sure your name is on the check and include a note that payment is for the HELP course.​​*

DEADLINES, PAYMENT, AND VISA POLICIES

Applications are processed on a rolling basis in the order that they are received until the course capacity is reached, so early application is encouraged. The final application deadline is noon EST on December 2, 2022. Applications must be accompanied by a non-refundable deposit of $150, which will guarantee your place in the course. The balance of the course tuition must be received on or by noon EST December 9, 2022. For individuals registering after December 9, 2022, the full tuition payment is due at the time of registration. Refunds, excluding deposits, will be issued by written request if received before the final payment deadline.

APPLICANT SIGNATURE

I sign certifying that I have read and agree to the policies regarding deadlines and payment.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Electronic Submission:** Please send your application, CV/resume, and proof of deposit payment as separate email attachments to the H.E.L.P. Course Coordinator at helpcourse.jhsph@gmail.com. **Your application will not be reviewed until all three components have been received**.