**H.E.L.P. COURSE (virtual) – 2025 APPLICATION FORM**

 Health Emergencies in Large Populations

Johns Hopkins University Bloomberg School of Public Health

Winter Institute

January 6-17, 2025

**Admissions/application deadline**: The final application deadline is 12pm U.S. Eastern Time on December 1, 2024. 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.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 School Area of Concentration Degree Year Received

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

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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?

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**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 virtual sessions held from January 6-17, 2025.
* 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 and there are different course fees.

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

TYPE OF REGISTRATION

The HELP course is offered for both academic credit and for non-credit. The HELP course is 5 JHU credit hours. The tuition rates for both academic credit and non-credit enrollments are found on the JHU Summer Institute website: <https://publichealth.jhu.edu/offices-and-services/office-of-admissions-services/tuition-and-fees> . Subtracting the general scholarship amount, available to all participants, the virtual HELP course cost for January 2025 will be $1500. A different amount will apply if you are seeking academic credit. Fees must be paid by December 1, 2024. Any applications after this date must be accompanied by full payment.

Once accepted for the course, you are required to pay a $150 non-refundable deposit within 2 weeks of receiving the acceptance confirmation email to secure your place. If failing to do so, your place cannot be guaranteed. There are a very small number of full scholarships available. A full scholarship covers the full cost of the course except the $150 for course fees. However, this will only be available for a few selected individuals in Low- and Middle-Income Countries. Please write to HELP coordinator at helpcourse.jhsph@gmail.com if you wish to apply for a full scholarship.

PAYMENT

Non-Refundable Deposit- to be provided at latest within 2 weeks upon reception of the acceptance, \*\*\*\***Please do not send deposit prior to being accepted**

email: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (US$150 minimum)

Balance Due: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by noon ET December 1, 2024, or at time of registration.

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
Student Accounts Operations
Garland Hall B075
3400 N. Charles Street
Baltimore, MD 21218

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

DEADLINES, AND PAYMENTS

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 1, 2024. Once accepted for the course, you need to send the confirmation of a non-refundable deposit of $150, which will guarantee your place on the course. The balance of the course tuition must be received on or by noon EST December 1, 2024. For individuals registering after December 1, 2024, 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 and CV/resume to the H.E.L.P. Course Coordinator at helpcourse.jhsph@gmail.com marking in the subject your name followed by ‘application HELP WI2025’.