

Name: _____

MIR Summer Research Program
Washington University School of Medicine

Application Deadline: Monday, January 26, 2026

Program Website: <https://wwwtest.mir.wustl.edu/research/training-opportunities/summer-research-program/>

Full Name: _____

Current Address:

Current phone number: _____

Permanent Address:

Phone number where you can be reached from early January to March 2026: _____

E-mail address (school): _____

E-mail address (personal): _____

Can you work in the United States? **Yes** **No**

Are you studying in the United States on a Visa? **Yes** **No** **If so, Visa type?** _____
(Please note that Washington University will *not* sponsor visas for this program)

Undergraduate Education

School: _____ Years: _____ to: _____ Location: _____

Major: _____ Degree(s) and year(s) when obtained/expected: _____

Overall GPA: _____

Other Undergraduate Education

School: _____ Years: _____ to: _____ Location: _____

Major: _____ Degree(s) and year(s) when obtained/expected: _____

Overall GPA: _____

_____(Check if 'Yes') I am enrolled in a dual undergraduate / medical education program.

School(s): _____ Years: _____ to: _____

Graduate or Medical Education (for current medical students only)

School: _____ Years: _____ to: _____ Location: _____

Name: _____

Major: _____ Degree(s) and year(s) when obtained/expected: _____

Other Graduate or Medical Education (for medical students only)

School: _____ Years: _____ to: _____ Location: _____

Major: _____ Degree(s) and year(s) when obtained/expected: _____

*MCAT Score (if taken): _____ If not, was it waived for medical school admittance: ____ Yes ____ No

Medical School Year Enrolled (if applicable): _____ year.

*We will accept unofficial pdf-copies of transcripts and MCAT score.

Honors/Awards:

MIR Summer Research Program Mentors

Please take some time to review the 2026 MIR Summer Research Program website, and review the [Participating Faculty list](#), to prioritize your 3 preferred mentors.

Learn more about MIR'S other research faculty <https://www.mir.wustl.edu/research/our-researchers/>

Note: It is preferred that you ***not*** contact the mentors directly until you have been selected for the program.

List up to three faculty members, *in order of preference*, that you would like work with as a mentor:

1. _____
2. _____
3. _____

Name: _____

1. Describe your research interests in Radiological Sciences and how you would benefit from participation in the summer program. Explain how the program aligns with your long-term academic goals.

2. Describe the factors that guided you in selecting your number one choice of faculty mentor.

Name: _____

3. **Interventional Radiology Summer Research Program (2 open slots)**

For the 2026 Summer Research Program, we are introducing two slots for Interventional Radiology. If interested in applying for the Interventional Radiology program, use the website below to contact one of the Interventional Radiology faculty and develop a project proposal. Upload this one-page summary as a *separate* section of your application. (The one-page summary is in addition to questions 1 & 2 on previous page.)

Link to subspecialty website:

<https://www.mir.wustl.edu/patient-care/interventional-services/interventional-radiology/>

___ YES, I am interested in applying to the Interventional Radiology Summer Program 2026 Student slot.
**** Attach separate 1-page summary of proposed project.**

___ NO, I am not interested in applying to the Interventional Radiology Summer Program 2026 Student slot.

4. **Prior Research Experience (if any):**

Location: _____ Dates: _____

Mentor: _____

Project title: _____

Location: _____ Dates: _____

Mentor: _____

Project title: _____

Publications and/or presentations:

Name: _____

The information I have given in this application is correct, to the best of my knowledge.

Name

Date

Application and Program Guidelines

Please return your completed application, official transcripts from all undergraduate schools (and medical school if applicable), and **two letters** of recommendation on the recommender's institutional letterhead. Include transcript from Master's graduate program (if applicable). For medical students, a medical school Dean's letter of good standing is required and two recommendation letters: at least one from a medical school faculty, and one from an undergraduate faculty or adviser (also on institutional letterhead). For highest consideration, letters of recommendation should be sent directly to us from the recommender, via email: mirsrp@email.wustl.edu. Please include in the subject line: "MIR SRP Recommendation for (student)". Undergraduate transcripts should contain **cumulative GPAs**. Medical school students *must* also submit MCAT scores to complete their application for the summer research program, *or* include an explanation why the MCAT was not required. Only completed applications will be submitted to the Selection Committee. We will accept unofficial pdf-copies of transcripts and MCAT score (if applicable). An optional CV may be included with application.

If you are in a *gap year* (graduated undergrad, but not yet started graduate or medical school) you are ineligible. However, you are welcome to apply once you are enrolled in a program and participating in classes in either graduate or medical school.

All above materials must be emailed to mirsrp@email.wustl.edu no later than Monday, January 26, 2026. Please make sure to include "MIRSRP2026" in the subject line. If sending via USPS mail, all materials must be post-marked by Monday, January 26, 2026. Decisions may be expected around the end of February.

For administrative questions, contact: Ekata Meshram, assistant program coordinator, at mirsrp@email.wustl.edu.

For program specific questions, contact: Vijay Sharma, PhD, Professor of Radiology, Neurology, and Biomedical Engineering: sharmav@wustl.edu.

More about the [2026 MIR Summer Research Program](#):

- The start date for the program is flexible to your school's schedule; you may start anytime between May 18 and May 26, 2026.
- This is a 10-week program based on approximately 40 hours per week.
- The 10-week program ends with an oral presentation, on Friday July 31, 2026. Each student must participate in a 15-minute presentation of their project. You are encouraged to support your fellow students and attend all other talks.
- You will be paid a stipend totaling \$8,000. You will receive one check at the end of June for \$4,000, and a second check at the end of July for \$4,000. Payments may be adjusted depending on the number of weeks participating in the program. This position is a temporary position paid via a stipend and is *not* benefits-eligible. There will be *no* taxes deducted from your checks, and you will receive an IRS "Form 1099" at the end of the year.
- Students are responsible for arranging their own housing for the summer. The stipend is intended to help offset costs related to living expenses.
- If you need local housing, a popular location is The Core Apartment Residences (the medical school dormitory), located on the medical school campus. It offers temporary housing options for guests of the University who wish to stay for up to three months. The available dates for housing are from May 19 through August 1. Contact them directly as soon as possible: <https://coreapartments.wustl.edu/>
- As a representative of the MIR Summer Research Program, you will be expected to comply with all applicable policies of Washington University and the School of Medicine. In addition, you will be expected to comply with all training requirements necessary for your lab or section. Washington University is committed to maintaining a safe and healthy community by promoting a drug and alcohol-free environment. Washington University follows CDC and American College Health Guidelines for **Tuberculosis** Screening and Targeted **Testing** of College and **University** Students. All new employees and students are required to have a tuberculosis skin test performed upon employment, at no cost.
- Throughout the summer, there will be planned social activities for Summer Researchers at Washington University.
- For transportation needs, you may purchase a Metrolink train pass for public transportation or a campus parking pass.

Application and Program Guidelines

- Program Acknowledgement for Publications: (A, preferred) With your name in author's association with the lab through the MIR Summer Research Program at Washington University; or option, (B) Acknowledgment for the program in the dedicated section. Please notify us of any publication citation resulting from your work in the MIR Summer Research Program.
- All students accepted to the program will be asked to complete a background check and drug test screening for clinical shadowing opportunities with faculty mentors.