



Applicant Information

The UC San Diego (UCSD) Youth Advisory Council (YAC) is pleased to invite you to apply for our inaugural UC San Diego Youth Advisory Council Public Health Investigators Camp, a two-day, free event designed to introduce and engage youth in the fields of global and public health.

Throughout the camp, you'll dive into key topics such as disease investigations, research, the importance of public and global health, and health policy. This hands-on program offers opportunities to collaborate with field experts, skill-building workshops, and professional development sessions. Participants will explore real-world health challenges and gain the tools and professional connections to become a leader in public health.

In accordance with applicable Federal and State law and University policy, the University of California does not discriminate, or grant preferences, on the basis of race, color, national origin, religion, sex, disability, and/or other protected categories. This camp will take place on the UC San Diego campus, and attendance is mandatory for accepted applicants. All participants will receive a certificate upon completion. This application is open to all youth ages 14–19.

Please only submit one application per applicant by 11:59 PM on Sunday, June 1, 2025. This is a competitive program - only 30 spots are available, so don't wait to apply! You'll be notified by Sunday, June 15th, if you've been accepted or placed on the waitlist.

EVENT DETAILS:

WHEN: Thursday and Friday, July, 24th and 25th, 2025 from 8:30 AM – 4:30 PM

WHERE: UC San Diego Campus

Breakfast and lunch will be provided for both days.

Contact for questions: Segen Zeray (Program Manager) – szaray@health.ucsd.edu

Applicant Information

Please fill in the following required information for the primary applicant.

First and Last Name: _____

Email: _____

Phone Number: _____

Age: _____

School Name: _____

Grade level:

- ☐ 9th Grade
- ☐ 10th Grade
- ☐ 11th Grade
- ☐ 12th Grade
- ☐ Gap Year
- ☐ Other

Participants must be present both days, from 9 to 4 PM, in order to receive a certificate of completion. Sign below to acknowledge your commitment to be present during the entire duration of the camp.

×

SIGN HERE

clear

Emergency Contact Information

Please fill out all required fields for the applicant's emergency contact. *This person must be a parent or guardian for those under 18.*

Emergency Contact First and Last Name: _____

Emergency Contact Relationship To Applicant: _____

Emergency Contact Phone Number: _____

Emergency Contact Email: _____

Applicant Demographics

We request this information in order to ensure a diverse and robust cohort of students who come from a variety of backgrounds and lived experiences.

Do you identify as an immigrant (defined as a person who comes to live permanently in a foreign country) or a refugee (defined as a person who has been forced to leave their country in order to escape war, persecution, or natural disaster)?

- ☐ Yes
- ☐ No
- ☐ Not Sure

Which of the following best represents your racial or ethnic heritage? *Choose all that apply.*

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Hispanic or Latino
- ☐ Middle Eastern or North African
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White or Euro-American (Non-Hispanic)
- ☐ Multiracial or Biracial
- ☐ Other

Optional: What is your ethnicity? (Please describe below.)

Free Response & Consent

Application Short Answer Questions

Please complete all required fields below. All free-response questions should be between 150–300 words.

1. Tell us a little about yourself. This can be a funny story, serious anecdote — anything really! (minimum 150 word count suggested).
2. Why are you interested in Public or Global Health and what are your overall academic or career goals? (minimum 150 word count suggested)
3. What interests you most about attending the Public Health Investigators Camp? (minimum 150 word count suggested)

Consent and Additional Information

Please complete all required fields below to complete this application.

Applicant Dietary Restrictions:

- ☐ Vegetarian
- ☐ Vegan
- ☐ Kosher
- ☐ Halal
- ☐ Gluten-free
- ☐ Dairy-Free
- ☐ Other:

During this event, photography and videography may occur. Images or videos may be used for promotional purposes in print, online, or social media. **Please indicate your consent – if you are under 18, please have your parent/guardian sign:**

×

SIGN HERE

clear