



Thank you for applying to the N2PH Residency Program.

Please email [new2publichealth@son.wisc.edu](mailto:new2publichealth@son.wisc.edu) with any questions.

Our team looks forward to reviewing your application!

Please list your contact information.

Name

Title

Email

Phone

Address

City, State, Zipcode

What is your race or ethnicity? Please check all that apply.

- American Indian or Alaska Native
- Asian / Asian American
- Black / African American
- Hispanic, Latino or Spanish origin

- Native Hawaiian or other Pacific Islander
- White
- None of the above
- Prefer not to answer

What is your gender identity?

- Prefer not to answer
- Woman
- Man
- Transgender Man/Trans Man/Female-to-male
- Transgender Woman/Trans Woman/Male-to-female
- Genderqueer/Gender Non-confirming/Non-Binary
- Not listed

What is your PRIMARY discipline that best describes your current and/or future professional role? Select one.

- Administrative/clerical personnel
- Animal services
- Behavioral health professional
- Clinical aid
- Community health worker
- Communication specialist
- Dental hygienist
- Dentist
- Emergency preparedness personnel
- Environmental health staff/sanitarian
- Epidemiologist
- Health educator
- Laboratory professional
- Laboratory technician

- Nutritionist
- Public health information system specialist/public health informatics specialist
- Public health manager/director/supervisor
- Public health nurse
- Public health physician
- Social worker
- Statistician
- Other, please specify:

What OTHER disciplines describe your current and/or future professional role(s)? Select all that apply.

- Administrative/clerical personnel
- Animal services
- Behavioral health professional
- Clinical aid
- Community health worker
- Communication specialist
- Dental hygienist
- Dentist
- Emergency preparedness personnel
- Environmental health staff/sanitarian
- Epidemiologist
- Health educator
- Laboratory professional
- Laboratory technician
- Nutritionist
- Public health information system specialist/public health informatics specialist
- Public health manager/director/supervisor
- Public health nurse
- Public health physician
- Social worker

- Statistician
- Other, please specify:

What areas does your position focus on? Select all that apply.

- Public health generalist
- Communicable disease
- Chronic disease and injury prevention
- Environmental health
- Maternal, child, and family health
- Emergency preparedness
- Health equity
- Substance misuse and mental health
- Policy development
- Communication
- Partnership development
- Evidence-based practice
- Community health assessment/community health improvement process
- Other, please specify:
- Click to write Choice 15

What is your primary time zone?

- Pacific
- Mountain
- Central
- Eastern

Please list your current public health employment details.

Organization Name

Street Address

City, State, Zipcode

Your Title

What type of governmental public health agency do you work for?

- Local
- Tribal
- State
- Other, please specify:

Which of the following settings do you primarily work in?

- Rural
- Urban
- Both

When was your start date at your current employer?

Is this your first job in a local, regional, state, or tribal public health agency?

- Yes
- No

Which best describes your employment status?

- Full time
- Part time
- Limited term employment (LTE)

Does your supervisor and/or agency support your participation in the New to Public Health Residency Program?

- Yes

- No
- Unsure

Do we have permission to contact your supervisor/manager?

- Yes
- No

### Supervisor Contact Information

Supervisor Name	<input type="text"/>
Supervisor Title	<input type="text"/>
Supervisor Email	<input type="text"/>

The New to Public Health Residency Program is a 12-month commitment. Residents spend approximately 10 hours per month on online learning, synchronous discussions, and peer/mentor networking. Are you able to commit this amount of time to the program if you are accepted?

- Yes
- No
- Unsure. Please explain:

### Personal Statement (750 Words Maximum)

Please attach a personal statement which includes the following components:

1. What led you to a career in public health?
2. What do you hope to gain from the N2PH Residency Program?
3. What are your short- and long-term goals in public health?

Please save the file name with your first and last name\_personal statement.  
(i.e. John Smith\_personal statement)

Drop files or click here to upload

Attach your updated resume/CV (this should include your current workplace).

Please save the file name with your first and last name\_resume.  
(i.e. John Smith\_resume)

Drop files or click here to upload

End of Application. Ready to submit? Click the blue arrow button below.



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