This program is contingent upon funding from the National Science Foundation
Application Form

I. BACKGROUND INFORMATION

A. NAME: ___________________________________________ E-MAIL: __________________________

B. SOCIAL SECURITY #: ___________________________ CSUN ID: ______________________________

C. ADDRESS: __________________________________________

D. CITY: ___________________________ STATE: ________ ZIP CODE: __________________________

E. TELEPHONE: (____) ___________________________ TODAY’S DATE: _________________________

F. DATE AND PLACE OF BIRTH: __________________________

G. U.S. CITIZEN: (CIRCLE ONE)  YES  NO  IF NOT, GIVE COUNTRY OF CITIZENSHIP: __________________________

H. PERMANENT RESIDENT (GIVE VISA SYMBOL AND NUMBER) OR N/A (NOT APPLICABLE): __________________________

I. GENDER: (CIRCLE ONE)  FEMALE  MALE

J. ETHNICITY (FOR STATISTICAL PURPOSES ONLY):  ☐ HISPANIC/CHICOANO (A)/LATINO (A)  ☐ NOT HISPANIC/CHICOANO/LATINO

K. RACE: (CHECK ALL THAT APPLY)

☐ AFRICAN AMERICAN/BLACK  ☐ CAUCASIAN/WHITE

☐ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER  ☐ AMERICAN INDIAN OR ALASKA NATIVE; TRIBE: __________

☐ ASIAN  ☐ OTHER (IDENTIFY): __________________________________________

L. ARE YOU DISABLED? (CHECK ONE)  ☐ YES  ☐ NO  ☐ CHOOSE NOT TO ANSWER

M. VETERAN STATUS (CHECK ONE)  ☐ NOT A VETERAN  ☐ NEWLY SEPARATED VETERAN  ☐ OTHER VETERAN

IF YOU ARE A VETERAN, DO YOU HAVE A SERVICE CONNECTED DISABILITY? (CIRCLE ONE)  YES  NO

N. PERSON TO CONTACT IN CASE OF EMERGENCY: __________________________________________

O. ADDRESS: __________________________________________

P. CITY: ___________________________ STATE: ________ ZIP CODE: __________________________

Q. RELATIONSHIP: ___________________________ TELEPHONE: (____) _________________________ EMAIL: __________________________

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II. EDUCATIONAL BACKGROUND

A. HIGH SCHOOL, LOCATION, AND YEAR OF GRADUATION: _______________________________________________________

B. UNDERGRADUATE COLLEGE OR UNIVERSITY: ______________________________________________________________

MAJOR: ___________________________________________________ DATE OF GRADUATION: _________________________

C. OVERALL UNDERGRADUATE GRADE POINT AVERAGE (A = 4.0, B = 3.0, C = 2.), ETC. ______________________________

D. GRADE POINT AVERAGE IN UNDERGRADUATE SCIENCE/ENGINEERING/MATH (SEM) COURSES: _______________

E. NAME OF THE CSU-LSAMP CAMPUS COORDINATOR OR OTHER ALLIANCE FOR MINORITY PARTICIPATION UNDERGRADUATE CAMPUS COORDINATOR: _______________________________________________________________

III. GRADUATE SCHOOL & CAREER PLANS

A. CHECK DEPARTMENT OF PROPOSED CSUN MASTER OF SCIENCE DEGREE:  ☐ PHYSICS;  ☐ GEOLOGY;

☐ COMPUTER SCIENCE;  ☐ MATHEMATICS;  ☐ CHEMISTRY/BIOCHEMISTRY  ☐ BIOLOGY;

☐ ENGINEERING (DEPT: ________________________________________________________________)

B. INDICATE WHO YOU HAVE E-MAILED OR CONTACTED IN THIS MAJOR AT CSU, NORTH RIDGE: ____________________________

C. IDENTIFY YOUR HIGHEST PLANNED EDUCATIONAL LEVEL:  ☐ MS  ☐ PHD  ☐ POST DOCTORAL  ☐ OTHER: __________

D. PROVIDE GRE GENERAL TEST SCORES/%:  VERBAL: _____/____%  QUANT : _____/____%  ANALYTICAL : _____/____%

E. HAVE YOU COMPLETED YOUR ON-LINE APPLICATION TO THE CSUN GRADUATE PROGRAM?  ☐ YES  ☐ NO

APPLY VIA  HTTP://WWW.CSUMENTOR.COM/ADMISSIONAPP/GRAD_APPLY.ASP

F. MANY DEPARTMENTS REQUIRE THAT YOU ALSO APPLY TO THE DEPARTMENT. HAVE YOU APPLIED TO THE DEPARTMENT?

☐ YES  ☐ NO  ☐ N/A
IV. PLEASE ATTACH THE FOLLOWING ITEMS TO COMPLETE YOUR APPLICATION

☐ A. TRANSCRIPTS OF ALL YOUR COLLEGE AND UNIVERSITY WORK. IF YOU ARE A CSUN STUDENT, SEND ONLY TRANSCRIPTS FROM WORK AT OTHER COLLEGES. WE WILL OBTAIN YOUR CSUN TRANSCRIPTS DIRECTLY FROM THE REGISTRAR.

☐ B. ATTACH OR ARRANGE TO HAVE A COPY OF YOUR GRADUATE RECORD EXAM (GRE) GENERAL TEST SCORES SENT TO DR. KARLA PELLETIER, CECSS STUDENT SERVICES CENTER. WE USE THE GRE AS AN INDICATOR OF YOUR INTEREST IN PURSUING THE PHD. NO PARTICULAR SCORE IS REQUIRED. GRE SCORE IS REQUIRED BEFORE AN INTERVIEW IS GRANTED.

☐ C. A CURRENT CURRICULUM VITAE/RESUME THAT INCLUDES ANY ACADEMIC (OR OTHER) HONORS RECEIVED.

☐ D. ATTACH ADDITIONAL PAGES, PROVIDING A RESPONSE TO EACH OF THE FOLLOWING. THE PROGRAM ADVISORY COMMITTEE WILL USE YOUR RESPONSES TO ASSESS YOUR INTEREST IN PURSUING A RESEARCH CAREER, AND ALSO YOUR ABILITY TO COMMUNICATE THROUGH WRITING. WE RECOMMEND THAT YOU TYPE YOUR RESPONSES TO THE FOLLOWING ITEMS:

- PLEASE DESCRIBE ANY PREVIOUS EXPERIENCE YOU HAVE IN RESEARCH OR RELATED AREAS.

- LSAMP-BD IS DESIGNED TO PREPARE STUDENTS FOR SUCCESS IN PHD PROGRAMS. HOW DOES THIS MESH WITH YOUR EDUCATIONAL GOALS?

- DISCUSS YOUR CAREER PLANS AFTER YOU COMPLETE YOUR FORMAL EDUCATION, PARTICULARLY HOW RESEARCH FITS INTO THESE PLANS.

- IF THERE IS A DISCREPANCY BETWEEN YOUR ACADEMIC GRADES OR GRE SCORES AND YOUR POTENTIAL, PLEASE EXPLAIN.

- EXPLAIN HOW YOUR SELECTION AS AN LSAMP-BD SCHOLAR WILL ENHANCE MINORITY PARTICIPATION IN RESEARCH CAREERS.

☐ E. IF YOU ARE NOT A US CITIZEN, ATTACH A NOTARIZED COPY (BOTH SIDES) OF YOUR ALIEN REGISTRATION PERMANENT RESIDENT ("GREEN") CARD.
F. Arrange to have three letters of reference written on your behalf by Science, Engineering, Computer Science or Mathematics faculty members. If you have participated in laboratory research, one letter should be from your research director. The letters should be delivered to you in sealed envelopes (signed across the seal) and included with your application. If the faculty prefer, they can send the letters directly to Dr. Karla Pelletier, CECSS Student Services Center.

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<tr>
<th>REFERENCE NAME</th>
<th>INSTITUTION NAME</th>
<th>PHONE NUMBER &amp; EMAIL ADDRESS</th>
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V. AUTHORIZATION TO USE RECORDS

I hereby authorize the LSAMP Program personnel to have access to my university records for purposes of admission to and continuation in the LSAMP-BD Program at CSU, Northridge. All information will be kept in strict confidence. The National Science Foundation (NSF) requires that we provide status reports on each LSAMP-BD fellow in their progression and entrance into the PhD program. We are also required to track your progress through completion of the PhD program. Student data are collected by the CSU-LSAMP Statewide Office at California State University, Sacramento prior to submission to NSF.

I also understand that one of the conditions of receiving this award is that I must maintain contact with the LSAMP coordinator (Dr. Karla Pelletier) at CSU Northridge after completion of my two-year master’s graduate degree program on a yearly basis so as to be able to keep LSAMP apprised of my accomplishments until at least my PhD is awarded. I authorize release and use of this information, as described above, to the CSU-LSAMP Program. I have read and understand all of the statements above.

_________________________________________________  ______________________
SIGNATURE OF APPLICANT                             DATE

Please be advised that no action will be taken on your application until your application is complete.

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Application Form - Continued

In order to be eligible for the LSAMP-BD Research Fellowship, you must have applied and been accepted for admissions to the CSU, Northridge Graduate School and to the specific department in which you intend to receive the Master of Science Degree. Please note that some departments have very specific deadlines to receive your application.

To apply, complete the on-line application form at: http://www.csumentor.com/admissionapp/grad_apply.asp

For more info on CSUN Graduate School: http://www.csun.edu/outreach/prospective/graduate/index.htm

For more info on each STEM department at CSUN, visit the following websites:

- Biological Sciences: http://www.csun.edu/~hfbio002/
- Chemistry & Biochemistry: http://www.csun.edu/chemistry/
- Civil Engineering and Applied Mechanics: http://www.csun.edu/~ceam/
- Computer Science: http://www.csun.edu/computerscience/dept_main_page.html
- Electrical Engineering & Computer Engineering: http://www.csun.edu/ece/
- Geological Sciences: http://www.csun.edu/geologicalsciences/
- Manufacturing Systems Engineering and Management: http://www.csun.edu/~msems/
- Mathematics: http://www.csun.edu/math/
- Mechanical Engineering: http://www.ecs.csun.edu/me/
- Physics and Astronomy: http://www.csun.edu/physicsandastronomy/

Please return completed application to:

Dr. Karla Pelletier
CECS Student Services Center/EOP
California State University Northridge
18111 Nordhoff Street
NORTHridge, CA 91330-8295

For more information:

Call: 818-677-2191
Email: karla.pelletier@csun.edu

Deadline to apply: April 15, 2013

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**Faculty Recommendation Form**

(Student: Please type or print your name on line above and give to faculty named on application)

has applied for a graduate research Fellowship in the NSF Louis Stokes Alliance for Minority Participation Bridge to the Doctorate (LSAMP-BD) Program at California State University, Northridge and has listed you as a reference.

Please return the completed form to the student in a sealed envelope (signed across the seal) or if you prefer, please send directly to Dr. Karla Pelletier, CECS Student Services Center/EOP, CSU Northridge, 18111 Nordhoff Street, Northridge, CA 91330-8295.

1. In the table below, give us your assessment of the applicant’s achievements and potential by checking the appropriate box for each category:

<table>
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<tr>
<th>Category</th>
<th>Outstanding (top 5%)</th>
<th>Excellent (top 10%)</th>
<th>Good (top 20%)</th>
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2. In the space provided below (or on back of this page or separate letterhead, if you prefer) please comment on the candidate’s potential for success in a research career in the sciences, engineering or mathematics.

Name _______________________________________________  Title ______________________________
Signature __________________________________________  Date ___________ Phone ____________________
Institution __________________________________________  Email _________________________________
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- 8 -
has applied for a graduate research Fellowship in the NSF Louis Stokes Alliance for Minority Participation Bridge to the Doctorate (LSAMP-BD) Program at California State University, Northridge and has listed you as a reference.

Please return the completed form to the student in a sealed envelope (signed across the seal) or if you prefer, please send directly to Dr. Karla Pelletier, CECS Student Services Center/EOP, CSU Northridge, 18111 Nordhoff Street, Northridge, CA 91330-8295.

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