

SUMMER I PROGRAM – Student Application

DEADLINE: JUNE 2, 2017

This form is confidential. It is to be seen only by the applicant, the applicant's parents, the mentor, ACS staff, and SEED Committee members. Income information will be used only for the purpose of verifying eligibility for participation in Project SEED.

STUDENT INFORMATION (Will not be accepted if all fields are not completed.)

Student Legal First Name:	
Student Legal Last Name:	
Home Address	
City:	
State:	
Zip:	
Telephone Number:	
Email:	
Birth Date:	

Gender: (check one) Male Female Grade you will enter Fall 2017 _____

Ethnicity: (check one) Asian American Indian/Alaskan Native Black/African American Hawaiian/Pacific Islander Hispanic/Latino White Other _____
(please specify)

Photos/Comments Release Statement:

I hereby grant rights to the American Chemical Society to use, edit, reproduce or distribute, and publish my photographs and content of my comments in print or electronic promotional, marketing, and waive all rights to compensation. If a minor, as a parent/guardian hereby gives complete authorization to my child to complete the Project SEED Exit Survey.

(Student Signature/date)

(Parent/Guardian Signature/date)

PARENT/GUARDIAN INFORMATION

You **MUST** submit a copy of your Parent/Guardian's 2016 IRS 1040 Tax Form for verification of income.

Parent/Guardian's Name:	
Address:	
City:	
State:	
Zip:	
Phone:	
Total Annual Family Income:	
Total Number of Family Members:	

(PARENT/GUARDIAN SIGNATURE)

By signing this application, I do certify that as the Parent/Guardian of applicant that the above income form Statement is correct. **The income you provide should match the Adjusted Gross income on the IRS 1040.**

STUDENT HIGH SCHOOL INFORMATION

High School Name:	
Address:	
City:	
State:	
City	
Zip:	
Teacher Name:	

Does your school have an ACS ChemClub?
 Yes No

For more information, visit the following website:
www.acs.org/chemclubs

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1. Please send a copy of your most recent official high school transcript. The transcript should include PSAT, SAT, or ACT test scores. Send it to:

Gregory Caputo
Rowan University
Department of Chemistry and Biochemistry
Science Hall 130C
Glassboro NJ 08028
caputo@rowan.edu

2. Please include a Teacher Evaluation Form from a current science teacher (preferably chemistry) familiar with your academic work. The teacher must submit this form electronically, the applicant will not be able to see any of the teacher's responses.

Applications, transcripts, and recommendations must be submitted on or before May 15, 2015.

Applicant Information

Name _____

Social Security Number _____

Address _____

City _____

State _____

ZIP Code _____

County _____

Evening Telephone Number _____

Are you a U.S. Citizen? _____

If not a U.S. Citizen, state your Country of origin, citizenship status, and type of visa you hold. _____

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Sex

Racial/Ethnic Origin

Grade

Date of Birth

Area of Science Interest

Email Address

Describe any disabilities of which you are aware.

If you have any, list all serious illnesses, chronic illnesses, and significant allergies.

Describe how you have spent your last two summers.

Parent/Guardian Information

Name of Parent or Guardian

Parent/Guardian's Street Address

Parent/Guardian's City

Parent/Guardian's State

Parent/Guardian's ZIP Code

Parent/Guardian's County

High School Information

Name of High School

Street Address

State

Zip Code

County

Name of High School Counselor

Phone Number of Counselor

Testing Information

PSAT Scores: (Math/Verbal)

SAT Scores: (Math/Verbal)

ACT Scores: (Math/Verbal)

Cumulative GPA

Class Rank

Activities and Academic Goals

List academic honors, prizes, scholarships, or extra-curricular activities, hobbies and special interests. Indicate any leadership positions held.

What are your plans for post graduate/professional training? (Check all that apply)

Graduate school to pursue Ph.D in science/engineering

Graduate School to pursue M.S. degree in science/engineering

Medical school

Other health professional program

Other (describe)

List the high school science and mathematics courses which you have completed. (Provide a numerical average for each course.)

Family Background

Number of brothers

Number of sisters

Father's Name (Last, First)

Is he living?

Father's Occupation

Father's Approximate Income Range (This information is required to insure program eligibility. Please select the appropriate financial income range.)

\$0 - \$15,000

\$16,000 - \$20,000

\$21,000 - \$25,000

\$26,000 - \$30,000

\$31,000 - \$35,000

\$36,000 - \$40,000

\$41,000 - \$50,000

\$50,000 - \$100,000

\$100,000+

Mother's Name (Last, First)

Is she living?

Mother's Occupation

Mother's Approximate Income Range (This information is required to insure program eligibility. Please select the appropriate financial income range.)

\$0 - \$15,000

\$16,000 - \$20,000

\$21,000 - \$25,000

\$26,000 - \$30,000

\$31,000 - \$35,000

\$36,000 - \$40,000

\$41,000 - \$50,000

\$50,000 - \$100,000

\$100,000+

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Personal Essay

Write an essay (2-3 paragraphs) describing your interest in science and your career goals. Include a discussion of any research or science fair projects in which you have participated as a high school student.

How can this program benefit you?