



**CALIFORNIA STATE UNIVERSITY
LOUIS STOKES ALLIANCE FOR MINORITY PARTICIPATION
(CSU-LSAMP) PROGRAM APPLICATION**

CAMPUS: FULLERTON

YEAR: 2017-2018

Initiated in 1993-1994, CSU-LSAMP is an alliance of the 23 campuses of the California State University (CSU) system which supports a coordinated and comprehensive system-wide approach to broadening participation in science, technology, engineering and mathematics (STEM) disciplines. Each of the CSU campuses has a CSU-LSAMP program that offers an array of activities and services designed to improve retention and graduation of undergraduate students in STEM. In addition, CSU-LSAMP seeks to increase the number of CSU-LSAMP students who enter STEM graduate programs.

To be eligible to participate in CSU-LSAMP, students must:

- Be a U.S. Citizen or Permanent Resident.
- Be enrolled at a participating campus in an undergraduate major in a STEM discipline or have expressed an interest in pursuing a STEM baccalaureate degree.
- Be an individual who has faced or faces social, educational, or economic barriers to careers in STEM.
- Each individual CSU-LSAMP campus program may have additional eligibility requirements.

I. General Information

Applying to be a: Participant Research Scholar

Note: Participant applications accepted year-round. Research scholar applications typically accepted prior to Fall/Spring semesters, contact LSAMP for exact deadline.

Name: _____
Last
First
Middle

CWID: _____ Gender: Male Female Decline to State

Address: _____
Street
City
Zip Code

Telephone: _____ Email: _____

Date of Birth: _____ Place of Birth: _____
City, State & Country

Citizenship: U.S. Citizen Permanent Resident Permanent Resident Registration Number: _____

*Please mark one of the boxes provided for **both** "Ethnicity" and "Race."*

Ethnicity (for statistical purposes only):

- Hispanic or Latino – A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race Not Hispanic or Latino Decline to State

Race (for statistical purposes only):

- African American or Black – A person having origins in any of the black racial groups in Africa
- Alaska Native – A person having origins in any of the original peoples of Alaska, including Eskimos or Aleuts
- American Indian – A person having origins in any of the original peoples of North America and maintaining cultural identification through tribal affiliation or community recognition
- Asian – A person having origins in any of the original peoples of East Asia, Southeast Asia, or the Indian subcontinent. This area includes, for example, China, India, Indonesia, Japan, Korea, and Vietnam
- Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, Polynesia, Micronesia, or other Pacific Islands
- White or Caucasian – A person having origins in any of the original peoples of Europe, North Africa, or the Middle East
- Other (specify): _____
- Decline to State



Funding for the CSU-LSAMP Program is provided by the National Science Foundation, HRD-1202873 and the California State University's Office of the Chancellor.



Name and CWID of Applicant: _____

II. Personal Information

A. Please indicate your parents' level of education:

Mother: No College Some College College Graduate Graduate School

Father: No College Some College College Graduate Graduate School

B. Disability Status (**for statistical purposes only**): Please check "yes" if any of the disabilities listed below the check box apply to you. Otherwise, check no or decline to state.

Yes No Decline to State

- Deaf or serious difficulty hearing
- Serious difficulty walking or climbing stairs
- Blind or serious difficulty seeing even when wearing glasses
- Other serious disability related to physical, mental or emotional condition

C. Are you a veteran of the U.S. Armed Forces?

Yes No Decline to State

D. As an undergraduate, are you eligible for need-based financial aid?

Yes No

E. Are you eligible for the EOP program? If you answer yes you must include supporting documentation.

Yes No

F. Are you treated as an independent student for financial aid purposes?

Yes No

G. What is your **personal annual** income?

Less than \$10,000 \$10,001 - \$20,000 \$20,001 - \$30,000 More than \$30,001

H. What is your **family's annual** income?

Less than \$10,000 \$10,001 - \$20,000 \$20,001 - \$30,000 More than \$30,001

I. Did you or a member of your family ever live in subsidized housing?

Yes No

J. Did you or a member of your family ever receive benefits from the Federal Free and Reduced Meal program?

Yes No

III. Educational Information

Major: _____ Minor (if any): _____

Class Level: _____ (e.g. freshman, sophomore, junior, senior)

Total Number of Units Completed: _____ Semester Units Quarter Units

Total Number of *Major* Units Completed: _____ Semester Units Quarter Units

Overall Cumulative GPA*: _____ GPA in Major: _____

**Attach the most recent copy of your unofficial transcripts.*



Name and CWID of Applicant: _____

IV. Additional Information Needed

Date you expect to receive your CSU Undergraduate Degree: _____

Anticipated Undergraduate Degree? BS BA

Did you transfer from a California Community College? Yes No

College name: _____ Units completed: _____ Receive AA/AT? Yes No

Will you be applying to a graduate program in the future? Yes No

If so, indicate the degree *objective* (MS, PhD), *discipline*, and the *planned date of entry* for the graduate program:
(e.g. PhD, Chemistry, 08/12/2020) _____

Have you attended a graduate preparedness activity or workshop in the past 2 years? Yes No

Have you been or will you be involved in any other program such as McNair, MARC, GRAM, etc.? Yes No

If yes, please indicate the program and dates of your participation: _____

Not including grants from the Financial Aid Office, will you or do you currently receive funding from any other on-campus program such as HHMI, McNair, MARC? Yes No

If yes, please indicate the program name and dates of funded participation: _____

Indicate semester(s) of expected funding: Fall 2017 Spring 2018 Summer 2018 Fall 2018

V. Additional Materials Needed to Complete Application

The following additional materials are required to complete your application:

1. Financial aid statement (can be obtained from Titan online) and EOP eligibility information, if applicable.
2. Copy of Social Security Card and Identification. *Due to confidentiality reasons, we are unable to accept an electronic copy. You may submit copies to our mailbox in MH-166 or directly to the LSAMP office.*
3. Copy of most recent unofficial transcripts.

VI. Additional Materials Needed for Research Scholar Application

To be eligible for program financial incentives to perform research, **a letter of support from a research mentor at CSUF must be submitted on your behalf.** Letters of support may be submitted via email directly to LSAMP@fullerton.edu or submitted in a sealed envelope to the LSAMP mailbox in MH-166.

The letter of support is only required for Research Scholar Applicants.



Name and CWID of Applicant: _____

VII. Student Signature/Release

Please read the statement below and sign where indicated:

The information I have submitted in my California State University LSAMP Application is true and accurate to the best of my knowledge. I understand that to track the progress of the CSU-LSAMP students and to evaluate program effectiveness, CSU-LSAMP requires access to student information. The CSU-LSAMP program is required to report individual student data to the National Science Foundation including social security number, ethnicity, GPA, and enrollment status. This information is also used to study student transfer, retention, progression, and graduation. Photographs and research abstracts may also be obtained for use by the CSU-LSAMP program in program dissemination materials such as websites, newsletters, and reports. The student data are collected by the CSU-LSAMP Statewide Office at California State University, Sacramento and each of the 23 affiliated Alliance CSU campuses.

I authorize release and use of personal information, as described above, to the CSU-LSAMP program. I understand that this information is to be used solely for evaluating the impact and effectiveness of the CSU-LSAMP program and that individual student data will not be released to parties other than those directly involved with the program.

Furthermore, if accepted into the program, I give permission to use my photograph, name, research abstracts, video and audio recordings, profile and/or story in future distributions, web pages, newsletters, reports, and other promotional materials produced, used by and representing the CSU-LSAMP program. Circulation of the materials could be worldwide and I am aware that there will be no compensation to me for this use. No other personal information will be made public without my permission. The contents of the websites are intended for the purposes of marketing and communication.

I have read and understand all of the statements above.

Printed name of applicant: _____

Signature of applicant: _____ Date: _____

Campus Coordinator Approval and Certification

The above-named student is approved as a CSU-LSAMP student?

- Yes – Is an individual who has faced or faces (check one) social educational economic barriers to careers in STEM.
 No – Does not meet eligibility criteria

The above-named student is approved as a **Research Scholar**?

- Yes
 No

Printed name of Campus Coordinator: Dr. Zair Ibragimov

Signature of Campus Coordinator: _____ Date: _____

Student Acknowledgement – TO BE SIGNED BY STUDENT UPON APPROVAL TO PROGRAM

I understand that upon receipt of the signed Expectations and Requirements form, I have been accepted to the CSU-LSAMP program and granted access to the various activities therein. I further understand that I must maintain expectations explained to me by the CSU-LSAMP Campus Coordinator for continued involvement in the program.

Signature: _____ Date: _____





Letter Writer Guide

The Louis Stokes Alliance for Minority Participation (LSAMP) appreciates your efforts in helping your student gain admission into LSAMP program. This guide is intended to assist you with suggested topics to mention in your evaluation of the applicant.

We ask that you please use the following format when composing your letter of recommendation: All letters of recommendations must be on letterhead, signed by the letter writer and contain a date of composition. **Please be sure to address all letters to: “Dear LSAMP Admissions Committee Members:”**

Please refer to the topics below for guidance with composing your letter of recommendation.

Personal Competencies

- **Integrity and ethics:** honesty and social responsibility
- **Reliability and dependability:** trustworthy, consistent results
- **Service orientation:** altruism, sensitivity and responsiveness to needs of others
- **Professionalism:** reliability, dependability
- **Social and interpersonal skills:** independence, leadership
- **Teamwork:** cooperative, abides by rules, accountability
- **Capacity for improvement:** self reflection
- **Resilience and Adaptability:** timely rebound, stress management, adapting to adversity, self improvement
- **Cultural Competence:** awareness of barriers across cultural groups and genders
- **Oral Communication:** concise
- **Personal qualities:** compassion, resilience, adaptability, self-reliance, sense of humor, stamina

Academic Competencies

- **Research competencies**
- **Desire to learn**
- **Attitude toward course activities in and outside of class**
- **Writing skills**
- **Group or teamwork skills**
- **Intellectual curiosity**
- **Overall academic excellence and ability, particularly if at variance with academic performance.**

Submitting your letter: LSAMP program asks that you send your letter of recommendation (preferably as a .pdf or a .docx) to LSAMP@fullerton.edu. If you wish to give the letter to the student you're recommending, please be sure to provide it to your student in a sealed envelope.

Alternatively, paper copies of the letter can be mailed to:

LSAMP Program
MH-166
California State University, Fullerton
Fullerton, CA 92834-6848