CAMPUS: San Diego State University YEAR:

**California State University Louis Stokes Alliance for Minority Participation Program (CSU-LSAMP)**

**APPLICATION** – **received by June 15th**

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 CSU-LSAMP campus program may have additional eligibility requirements. Please see the Campus Coordinator.

## I. General Information

Gender:

[ ]  Male

[ ]  Female

[ ]  prefer to self-describe:

[ ]  Prefer not to answer

Name:

 Last First Middle

Address:

 Street City Zip Code

Telephone: (     )        Email:

 Please include area code

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

Social Security #:       Student REDID #:

(Required by the National Science Foundation)

Citizenship: [ ]  U.S. Citizen [ ]  Permanent Resident (must provide copy of 1-151 or 1-551 card)

If applicable, Permanent Resident Registration #:

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):

[ ]  Black or African-American - A person having origins in any of the black racial groups in Africa

[ ]  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

[ ]  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

[ ]  Alaska Native - A person having origins in any of the original peoples of Alaska, including Eskimos or Aleuts

[ ]  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, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam

[ ]  White - A person having origins in any of the original peoples of Europe, North Africa, or the Middle East

[ ]  Other (specify):

[ ]  Decline to State

## II. Personal Information

1. Please indicate your parents’ level of education:

Mother:[ ]  No College[ ]  Some College [ ]  College Graduate [ ]  Graduate School [ ]  Unknown

Father: [ ]  No College[ ]  Some College [ ]  College Graduate [ ]  Graduate School [ ]  Unknown

It either parent obtained college degree, state what field/fields

1. Disability Status (**again, 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
* Blind or serious difficulty seeing even when wearing glasses
* Serious difficulty walking or climbing stairs
* Other serious disability related to a physical, mental, or emotional condition
1. Are you a veteran of the U.S. Armed Forces? [ ]  Yes [ ]  No [ ]  Decline to State
2. As an undergraduate, are you eligible for need-based financial aid? [ ]  Yes  [ ]  No
3. Are you treated as an independent student for financial aid purposes? [ ]  Yes [ ]  No
4. What is your ***Personal* yearly** income?

 [ ]  Less than $10,000  [ ]  $10,001 - $20,000  [ ]  $20,001 - $30,000 [ ]  More than $30,000

1. What is your ***Family’s*** yearly income?

 [ ]  Less than $10,000 [ ]  $10,001 - $20,000 [ ]  $20,001 - $30,000 [ ]  More than $30,000

## III. Educational Information

Major:       Minor (if any):

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

|  |
| --- |
| Students must have taken at least Pre-Calculus to be eligible for the program; if the course at your school was not titled pre-calculus, please note which course covered pre-calculus \*Students required to enroll in the SDSU Early Start FAST Program are not eligible for CSU-LSAMP |
| SAT or ACT Scores                                     |
| Please List All Math Courses (Pre-Calculus & Above) Taken in High School and/or College:

|  |  |  |  |
| --- | --- | --- | --- |
| Math Course: | Where Taken: | When Taken: | Grade Received: |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

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High School G.P.A. (Do not round up):

 Overall Weighted GPA Non-Weighted GPA

Date you expect to receive your CSU Undergraduate Degree (Month/Year):      \_\_\_\_\_

Anticipated Undergraduate Degree (BA/BS):

Do you have any Community College Course Credit? [ ]  Yes [ ]  No

If yes, which college:

If yes, how many units did you earn?

Did you complete an Associate’s degree? [ ]  Yes [ ]  No

What is your goal after earning your BA/BS?

[ ] PhD [ ] Masters [ ] MD/PhD [ ] Teaching Credential [ ] Work [ ] Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_

## IV. Program Participation

Which programs did or do you participate in:

[ ] COMPACT for Success/Compact Scholars [ ] EOP/EOPOS [ ] HCOP [ ] ICAN

[ ] HPAO [ ]  IMSD [ ]  MESA [ ] Pre-MARC/MARC [ ]  PSP [ ]  Weber’s Honor College

[ ] EOP Summer BEST Program [ ]  Upward Bound [ ] OTHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## V. Supplemental Material

**Please include the following with your application (you will not be eligible if you do not have a completed application package):**

1. **A copy of your most recent transcript (unofficial copies accepted)**
2. **A copy of your most current SDSU Financial Aid Award Summary; if you have not applied for financial aid, please state that here:**
3. **1-2-page essay stating a) why you chose your major, b) why you want to participate in the CSU-LSAMP@SDSU program and how participation in the program will assist you and c) Describe any cultural, social, or economic barriers you faced in your pursuit of higher education:**

## VI. Student Signature/Release

Please read the statement below and sign where indicated:

The information I have submitted in my California State University LSAMPS 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.*

*I have read and understand all of the statements above.*

Printed Name of Applicant:      ­­

Signature of Applicant: Date:

**Return completed application packet to:**

**Thelma Chavez**

**thelma.chavez@sdsu.edu**

## 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

**Printed Name of Campus Coordinator**:

**Signature of Campus Coordinator**:       **Date:**

FOR OFFICE USE ONLY

|  |  |  |  |
| --- | --- | --- | --- |
| \_\_\_\_\_Summer Google Doc | \_\_\_e-Mail added to contacts | \_\_\_\_\_CSU-LSAMP Google Doc | AP Scores: |
| \_\_\_\_EOP SB Confirmation | \_\_\_\_\_\_Accepted Yes/No | \_\_\_\_Confirmation received from students | \_\_\_\_ALEKS Info | \_\_\_\_\_WebAMP |

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

**I understand that 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.**

Signed:       Date: