

ALABAMA LOUIS STOKES ALLIANCE FOR MINORITY PARTICIPATION (ALSAMP)

SCHOLARSHIP APPLICATION

Type or Print

Today's Date _____

Part I Personal and Contact Information

1. Social Security Number _____

2. Date of Birth ____/____/____

3. Full Name _____
Last First Middle Suffix

4. Gender Male Female

5. U.S. Citizen Yes No If no, are you a permanent resident? Yes No

6. Race (Choose one):

- American Indian or Alaska Native
- Black or African American
- Native Hawaiian or Other Pacific Islander
- Asian
- Hispanic or Latino
- White
- Two or More Races _____

7. Permanent Address _____ City _____

State _____ Zip _____ Phone _____

8. Current Address (if different from above)

Address _____ City _____

State _____ Zip _____ Phone (____) _____

9. E-mail Address _____ Cell Phone (____) _____

10. Did you earn a GED? Yes No

11. Home schooled? Yes No

12. GPA _____ (Must be on a 4.0 scale)

High School _____

Location _____

13. Highest ACT composite score (From one test date only) ____English ____Math ____ Reading ____ Sci. Reasoning

14. Highest SAT composite score (From one test date only) _____ Verbal _____ Math

15. What will be your major field of study? _____

16. List math and science classes taken including grades. _____

Part II Activities

17. List any academic achievements/honors received. _____

18. List any summer programs in which you were a participant. _____

19. List any elected or appointed leadership positions. _____

20. List volunteer activities at the school, community, state level. _____

21. List any work experiences. Indicate full-time, part-time, or summer only. _____

I have completed all sections of this application and certify that all information given in this application is complete and accurate. I understand that withholding information requested or giving false information may make me ineligible for a scholarship. I authorize the release of all requested information to any agency or organization from which I may receive a scholarship or for publicity purposes.

Applicant's signature (Full legal name) _____ Date _____

Instructions

Return the completed application along with three letters of recommendation from academic teachers and a one page typed or printed essay describing your career goals to:

Alexandra Stenson, PhD
Assistant Professor, Dep. Chemistry
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