

 SAVANNAH STATE UNIVERSITY 

### Engineering Technology Department

### TRIO Upward Bound

## UPWARD BOUND/UNITE Summer Program

## APPLICATION

**FULL NAME:**

**SEX:** [ ]  *MALE* [ ] *FEMALE* **U.S. Citizen:** [ ]  *YES* [ ]  *NO*

**TELEPHONE:**

**E-mail:**

**AGE:**  **Date of Birth:**

**ADRESS:**

**Ethnic Origin:**

**PARENT OR GUARDIAN NAME:**

**PARENT OR GUARDIAN ADDRESS:**

**HIGH SCHOOL:**

**GRADE:**

**HAVE YOU TAKEN THE SAT OR ACT?**  [ ]  *YES* [ ]  *NO*

**IF YES, WHEN**       **CUMULATIVE SCORE**       **MATH SCORE**

**WHAT IS YOUR GRADE POINT AVERAGE?**

**LIST THE SCIENCE, TECHNOLOGY, ENGINEERING AND MATHEMATICS (STEM) COURSES YOU HAVE TAKEN AND GRADES EARNED:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *COURSE NAME:* | *GRADE* |  | *COURSE NAME:* | *GRADE* |
| 1.
 |  |  | 1.
 |  |
| 1.
 |  |  | 1.
 |  |
| 1.
 |  |  | 1.
 |  |
| 1.
 |  |  | 1.
 |  |
| 1.
 |  |  | 1.
 |  |

**LIST ANY CLUBS OR ASSOCIATION IN WHICH YOU ARE A MEMBER (INDICATE OFFICE HELD)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *CLUBS OR ASSOCIATION* | *OFFICE HELD* |  | *CLUBS OR ASSOCIATION* | *OFFICE HELD* |
| 1.
 |  |  | 1.
 |  |
| 1.
 |  |  | 1.
 |  |
| 1.
 |  |  | 1.
 |  |
| 1.
 |  |  | 1.
 |  |
| 1.
 |  |  | 1.
 |  |

**LIST ANY SCIENTIFIC AND / OR MATHEMATICS COMPETITION IN WHICH YOU PARTICIPATED**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

**LIST ANY HONORS, PRIZES, AND AWARDS YOU HAVE RECEIVED**

|  |
| --- |
|  |
|  |
|  |
|  |
|  |

**APPROXIMATELY HOW MANY HOURS DO YOU STUDY A DAY?**

**LIST YOUR FOUR (4) MOST FAVORITE SUBJECTS IN ORDER OF INTEREST**

|  |
| --- |
| 1.
 |
| 1.
 |
| 1.
 |
| 1.
 |

**DO YOU PLAN TO ATTEND COLLEGE?**  [ ]  *YES* [ ]  *NO*

**WHAT WOULD BE YOUR PROBABLE MAJOR? LIST IN ORDER OF PREFERENCE.**

|  |
| --- |
| 1.
 |
| 1.
 |
| 1.
 |
| 1.
 |

 SIGNATURE DATE

***REQUIRED DOCUMENTS:***

* ***APPLICATION***
* ***200-300 WORDS ESSAY ABOUT YOUR INTEREST IN STEM DISCIPLINE***
* ***TEACHER RECOMMENDATION FORM***
* ***COUNSELOR RECOMMENDATION FORM***

|  |  |
| --- | --- |
| ***SEND ALL REQUIRED DOCUMENTS TO:*****MR. BOBBY ROBERTS,** DIRECTORSSU UPWARD BOUND UNITE PROGRAM3219 College Street Box 20488SAVANNAH STATE UNIVERSITYSAVANNAH, GA 31404Telephone: (912) 358-3477Fax: (912) 358-3687Robertsb@savannahstate.edu | **FOR ADDITIONAL AEOP OPPORTUNITIES VISIT:** **U.S. ARMY EDUCATIONAL OUTREACH PROGRAM AT:**[**http://www.usaeop.com/**](http://www.usaeop.com/)**COORDINATED BY TECHNOLOGY STUDENT ASSOCIATION (TSA)** [**http://www.tsaweb.org/**](http://www.tsaweb.org/) |

**teacher RECOMMENDATION form**

       has applied for admission to the SSU Upward Bound- UJETS Summer Program. **Please submit this completed form to:**

SSU Upward Bound UNITE Program

3219 College Street Box 20488

Savannah, GA 31404

Telephone: (912) 358-3477

Fax: (912) 358-3687

Please evaluate the student’s interest in academic work:

[ ]  Excellent [ ]  Above Average [ ]  Average [ ]  Below Average [ ]  Poor

Please describe the quality of the student’s participation in your class.

Describe the student’s regard for authority and his/her peer collaboration skills.

Evaluate the student’s potential or desire to continue his/her education beyond high school.

[ ]  Excellent [ ]  Above Average [ ]  Average [ ]  Below Average [ ]  Poor

Please summarize any special circumstances that have affected the student’s progress.

Do you recommend this student for the Upward Bound – UJETS Summer Program?

[ ]  Enthusiastically [ ]  With Reservations [ ]  No

Additional Comments:

Teacher Name:

High School and Class Name:

Telephone:

E-mail Address:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COUNSELOR RECOMMENDATION form**

       has applied for admission to the SSU Upward Bound UJETS Summer Program. **Please submit a transcript along with the completed form to:**

SSU Upward Bound UNITE Program

3219 College Street Box 20488

Savannah, GA 31404

Telephone: (912) 358-3477

Fax: (912) 358-3687

What is the student’s G.P.A.?(If possible, please list on a 4.0 scale)

What is the rank of the student?

Please check the student’s curriculum plan:

[ ]  college preparatory [ ]  general curriculum [ ]  vocational curriculum [ ]

Please list the student’s current schedule:

|  |  |  |
| --- | --- | --- |
|       |       |       |
|       |       |       |
|       |       |       |

Has the student met the following proficiencies? Please indicate Yes (Y), No (N) or Unknown (UK)

|  |  |  |  |
| --- | --- | --- | --- |
| State Proficiency |       | Met 8th GR. Reading/Language |       |
| Met 8th Gr. Math |       | Met 10-12th Gr Reading/Language |       |
| Met 10-12th Gr. Math |       | Met High School Graduation proficiencies |       |
| Others (name) |       |  |  |

Please supply all applicable test scores of the student:

|  |  |
| --- | --- |
| ACT PLAN |  |
| PSAT |  |
| ACT (please list all scores) |  |
| SAT (please list all scores) |  |

Please evaluate the student’s interest in academic work:

[ ]  Excellent [ ]  Above Average [ ]  Average [ ]  Below Average [ ]  Poor

 Describe the student’s regard for authority and his/her peer collaboration skills.

Evaluate the student’s potential or desire to continue his/her education beyond high school.

[ ]  Excellent [ ]  Above Average [ ]  Average [ ]  Below Average [ ]  Poor

Please summarize any special circumstances that have affected the student’s progress.

Do you recommend this student for the SSU Upward Bound – UJETS Summer Program?

[ ]  Enthusiastically [ ]  With Reservations [ ]  No

Additional Comments:

Counselor Name:

High School:

Address:

Telephone:

E-mail Address:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_