Springfield Technical Community College

www.stcc.edu/STEMacademy

Mail completed application to:

Dean Robert Dickerman School of Science & Engineering Transfer Springfield Technical Community College One Armory Square, Suite 1 P.O. Box 9000 Springfield, MA 01102-9000

Phone: (413) 755-4576 • Fax: (413) 755-4575

Application for STEM Starter Academy

"STEM Starter Academy" is funded in part by the Massachusetts Department of Higher Education.

General Information

Eligible recent high school graduates (classes of 2015, 2016, or 2017), who are Massachusetts residents and have applied for enrollment at Springfield Technical Community College for Fall 2017 may apply to participate in the STEM Starter Academy. If selected, participants will take free college courses and explore STEM fields through field trips and guest speaker lectures from July 3 through August 11, 2017. Participants will also be assigned a STEM Coach and provided with tutoring support during the summer and through the academic year.

STEM graduates are in demand! Let STCC prepare you for a STEM career!

Please note: STEM Starter Academy applications are due Friday, May 12, 2017. This is a competitive process. Not everyone who applies will be admitted into the program. Women and students of color are strongly encouraged to apply.

STEM Starter Academy Eligibility Requirements

- Must be a recent Massachusetts high school graduate. Class of 2015, 2016, or 2017.
- Must have applied to STCC for Fall 2017.
- Must be a U.S. citizen and a Massachusetts resident.
- Must have a grade point average of 2.0 or higher.

| Application C Please be sure | to include the following materials: | | | | | |
|---------------------------------|---|-----------------------------------|------------------|---------------------------------|----------------------------|--|
| 1. Applica | Application. (completed and signed.) We communicate with applicants via email. Provide a reliable email address that you check and use often. | | | | | |
| 2. Letter of be submitted | Letter of Reference. Submit one letter of reference to our office by someone who is qualified to evaluate your academic background. The letter should be submitted with your application. | | | | | |
| 3. Transc | ripts. Attach unofficial copies of transc | ripts from your high school and a | ny other college | es or universities attended, if | fapplicable. | |
| 4. Partici | pant consent. Submit a signed copy o the expectations of the STCC STEM Star | f the consent form. By signing th | | | | |
| Any question | s or concerns? Contact: Dean Robert I | Dickerman • Email: dickerman@s | tcc.edu • Phone | : 413-755-4576 | | |
| Name: | | | | | | |
| _ | Last | | First | Mic | ddle | |
| Permanent Leg | gal Address: | Street | City | State | . Zip | |
| Home phone: | :(| Cel | phone: (|) | | |
| · | | | | | ve text messages from STCC | |
| Email address: | : | | | e ii you do not wish to recei | | |
| Mailing Addre | SS: | | | | | |
| (if different from le | | Street | City | State | Zip | |
| Male | Female SS# |]- | Birth Date | month day | year | |
| High School G | raduated From: | | | Date of Graduation: | Current GPA | |
| High School A | ddress: | | | | | |
| _ | | Street | City | St | ate Zip | |
| | sonal Information. Citizenship Status | : (Please check <u>ONE</u>) | | | | |
| United Stat | | | | | | |
| Resident A | lien Country of citizenship (Copy of alien registration card req | | | | | |
| Refugee | Country of birth(Copy of I-94 required.) | | | | | |
| Visa | Indicate type(Copy of I-94 required.) | Country of citizenship | | | | |
| Other | Please explain | | | | | |
| Are you a vete | ran of the U.S. armed forces? | No | | | | |

MASSACHUSETTS RESIDENCY STATEMENT A person is considered a resident for STEM Starter Academy purposes if residency is bona fide and has been maintained for at least six continuous months immediately preceding the date of enrollment, and if the person has the intention of living in the state indefinitely. ____, CERTIFY THAT I HAVE BEEN A RESIDENT OF MASSACHUSETTS SINCE STCC Program Choice (see programs list): ______ Program Code: ______ What are your plans after completing your associate's degree from Springfield Technical Community College? Find employment Apply to attend a four-year college or university Other Do you attend or have you previously attended a college or university. \square yes \square no If yes, name of current college or university: _____ Current GPA:_____ Major or course of study: ____ List any clubs or organizations you joined in high school (or college if applicable): List any Extracurricular or Volunteer Activities: Are you current employed? yes no If yes, where do you work? _____ How many hours per week? _____ Letter of Reference: List the name of the person who has written your letter of recommendation.______ Ethnic/Race information: (This information is used for statistical purposes only and is optional.) Please select one: Hispanic or Latino Not Hispanic or Latino Please check one or more of the following: American Indian or Alaska Native 🔲 Asian 🔲 Black or African American 🔲 Native Hawaiian or Other Pacific Islander 🔲 White Annual Household Income: (This information is used for statistical purposes only and is optional.) Please select one: □ Up to \$20,000 □ \$20,001-\$30,000 □ \$30,001-\$40,000 □ \$40,001-\$50,000 □ \$50,001-\$60,000 □ \$60,001-\$70,000 \$70,001-\$80,000 \$80,001 - \$90,000 \$90,000 - higher Additional Information: (This information is used for statistical purposes only and is optional.) Check box, if applicable: ☐ First-generation in your family to attend college ☐ Disabled ☐ IEP/504 How did you first hear about the STEM Starter Academy? Choose only one. Email Brochure/Mailing Friend Internet search STCC Campus Tour Family member Facebook High School Guidance Counselor STCC staff VouTube High School teacher STCC student STCC.edu or other STCC website STCC staff visit to your high school 🖵 STCC alumnus/a 🖵 STCC STEM Starter Academy website 🖵 Past or current STCC STEM Starter Academy participant 🖵 STCC college fair ☐ TV/radio/newspaper ☐ Other: ___ I certify that all information stated on this application is accurate and complete. Applicant's signature:___ SIGN Parent/Guardian's signature (if applicant is under 18 years old): _____