



# ALABAMA STATE UNIVERSITY

## SCHOLARSHIP TO PROMOTE RETENTION AND GRADUATION RATES IN STEM DISCIPLINES



Supported by the National Science Foundation Scholarships for Science, Technology, Engineering and Mathematics (S-STEM) Program

### APPLICATION FORM

1. Student Name \_\_\_\_\_ Student No. \_\_\_\_\_
2. Citizenship: U.S. Citizen \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Permanent Resident \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_
3. Ethnic Classification: African Amer. \_\_\_\_\_ Hispanic \_\_\_\_\_ Asian/Pac. Islanders. \_\_\_\_\_ Amer. Indian/Nat. Alaskan. \_\_\_\_\_
4. Local Address \_\_\_\_\_ Telephone \_\_\_\_\_  
(Street) (City) (State) (Zip Code) (Area Code)
5. Home Address \_\_\_\_\_ Telephone \_\_\_\_\_  
(Street) (City) (State) (Zip Code) (Area Code)
6. Email: \_\_\_\_\_
7. Major \_\_\_\_\_ Minor \_\_\_\_\_ Classification \_\_\_\_\_
8. Degree you are working for \_\_\_\_\_ Expected Date of Graduation \_\_\_\_\_
9. GPA: Overall \_\_\_\_\_ Major Area \_\_\_\_\_
10. List all honors, awards, and scholarships and fellowships that you may have received.  
\_\_\_\_\_  
\_\_\_\_\_

11. Give names of at least two college-level faculty members from your major area who are familiar with your work. Please request these individuals to complete the S-STEM recommendation form on your behalf.

<u>NAME</u>	<u>DEPARTMENT</u>	<u>TELEPHONE</u>
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
Student Signature Date

**Return completed application to:**

Dr. Manoj Mishra (PI)  
S-STEM Program  
Alabama State University  
Montgomery, AL 36101-0271  
Telephone: (334) 229-5085  
FAX: (334) 229-5035

Mr. Elijah Nyairo (Co-PI)  
S-STEM Program  
Alabama State University  
Montgomery, AL 36101-0271  
Telephone: (334) 229-6923  
FAX: (334) 229-4902

Mr. Rick Drake (Co-PI)  
S-STEM Program  
Alabama State University  
Montgomery, AL 36101-0271  
Telephone: (334) 229-5104

NOTE: Student's eligibility for financial scholarship will also be based on individual student needs and family contributions as determined by the financial aid administrator at ASU.



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## RECOMMENDATION FORM

To be completed by applicant. Please TYPE or print all responses.

Complete the information above the dotted line. Give this form to your recommender and ask him/her to return the completed form and letter of recommendation directly back to you or the S-STEM Program Staff.

Applicant's Name \_\_\_\_\_

I agree that the recommendation I am requesting shall be held in confidence by officials of Alabama State University and hereby waive any rights I may have to examine it.  I Agree  I Disagree

Applicant's Signature \_\_\_\_\_

.....

To be completed by the evaluator.

How long and in what capacity have you known the applicant? \_\_\_\_\_

\_\_\_\_\_

Please rate the applicant in the following areas.

	Excellent	Good	Average	Poor	*N/A
Academic performance					
Ability to conduct a supervised project					
Intellectual curiosity and/or creativity					
Self motivation					
Motivation for doing research					
Breadth of science background					
Written communication skills					
Oral communication skills					
Personal reliability and responsibility					
Potential for graduate/professional school					

\*Not enough opportunity to observe.

Please provide a written evaluation of the applicant, if necessary, describing your knowledge of the applicant and reasons why you recommend his/her participation in the S-STEM Program. **Applications will not be considered without a complete recommendation form.** Thank you for your willingness to assist in this evaluation.

Evaluator's Name \_\_\_\_\_

Organization and Title \_\_\_\_\_

Address \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return the recommendation form to: Dr. Manoj Mishra at Life Science Building Room 224 or Mr. Elijah Nyairo at H C Trenholm Hall Room SB-312