

9. Major (best fit) \*
-- Please Select --

ey: 2010 CBST Community College W	/inter Research Program - Application	on Form			Status: Launched
Personal Information					
Page Intro/Notes: edit					
IMPORTANT: You can apply to the 2010 CCWinter P	rogram if you are a sophomore students intending	to transfer to UC Davis in the	Fall 2010. US citizens	or Permanent Residents O	NLY.
1. Contact Information  First Name, MI and Last Name  Street Address  **  **  **  **  **  **  **  **  **	Apt/Suite/Office		City*	State <sup>‡</sup> Postal C	:ode*
			) [		
Email Address*	Home Phone Number*	Mobile Phone			
2. Your date of birth (mm/dd/yyyy) *					
3. I certify I am a * Please Select					
4. Gender •  Please Select					
5. Ethnicity *					
Please Select					
ducation					
6. Your community college					
7. What is your grade level now? *  Please Select					
Expected graduation date for your associate	degree (mm/yyyy) *				
o. Experied graduation date for your associate	acgree (min yyyy)				

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10. Latest period	GPA (Spring)
Please Select	•
Please Select	
1. Cumulative GF	PA, all college courses so far.
Please Select	t
2. Cumulative GI	PA of Science, Technology, Engineering and Math courses ONLY.
Please Select	t
3. Number of Sci	ience, Technology, Engineering and Math classes completed so far. *
Please Select	t
4. List the classe	es you were enrolled in for the fall 2009 (please specify the subject, don't use codes).
1	
1	
2	
3	
<b>.</b>	
4	
5	
6	
IS Do you have r	olans to continue your education beyond your undergraduate degree? Please chose the highest degree that you plan on pursuing.
My ultimate goal i	
ny animate gour i	
Associate de	gree
<ul> <li>Bachelors de</li> </ul>	
<ul><li>Masters degr</li></ul>	
Medical Doct	
Other Profess	sional degree
PhD degree	
I am not purs	uing a degree
6. Indicate the ye	ear when you plan to transfer: *
	t
Please Select	
Please Selec	
	ission Guarantee (TAG) agreement with a University of California Campus
17. Transfer Admi	ission Guarantee (TAG) agreement with a University of California Campus

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I plan to transfer to the following institution to co	omplete my bachelors degree.
UC Berkeley	4
UC Davis	<b>♣ ☆</b>
UC Irvine	<b>♣ ☆</b>
UC Los Angeles (UCLA)	<b>♣ ☆</b>
UC Merced	<b>♣ ☆</b>
UC Riverside	<b>♣ ☆</b>
UC San Diego	<b>♣ ☆</b>
UC Santa Barbara	<b>♣</b> ★
UC Santa Cruz	<b>♣</b> ★
California State University	<b>♣</b> ★
Other four year institution in California	<b>♣ ☆</b>
A four year institution in a different state	<b>♣ ☆</b>
Other	<b>☆</b>
Research	
19. I have participated in a research program *	
<ul><li>Never</li><li>⊟ High School Program</li></ul>	
NIH Internship	
☐ NSF Internship	
Research laboratory at my collge	
☐ Other	
20. How long have you actively been involved in	a research project?*
<ul><li>N/A</li><li>□ 1-4 weeks</li></ul>	
1-3 months	
3-6 months	
More than 6 months	
21. If applicable, what was the title of the research	ch project you worked on?
amily background	
22. Describe the language(s) spoken at home. *	
Please Select	
23. Parents' or guardians' highest level of forma *	l education.
Father or Guardian Please Select	
Mother or Guardian Please Select	
24. Occupation of father or guardian *	

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25. Occupation of mother or guardian *	
26. Number of persons in your household (including yourself). If you have roomat	es and do not live withe family you should write down 1
•	
Please Select	
27. Describe your household.	
☐ I am part of my parents household	
☐ I am the head of my household	
5. Family Background - I am part of my parents household	
28. I am part of my parents household	
A) Number of siblings	Please Select
B) I am thest/nd/rd child	Please Select
C) of my siblings (or people in my household) are presently attending college	Please Select
D) of my siblings have graduated from college	Please Select
6. Family Background - I am the head of my household	
29. I am the head of my household	
A) Number of children Please Select	
B) of my children are presently attending college	
C) of my children have graduated from college	
7. Financial Aid	
30. Do you work? *	
Please Select	
31. What kind of work do you do? *	
32. How many hours a week do you work? *	
Please Select	
8. Additional Information	

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33. How did you hear about this research opportunity? *
☐ CBST event
CBST representative visited my college
☐ CBST web-site
☐ SACNAS
☐ Through a friend that participated in a CBST program
☐ Other
34. Do you belong to the MESA program in your college?
☐ Yes
□ No
35. Comments  36. I certify that the information reported on this application, to the best of my knowledge, is true and correct. I authorize the CBST to release the information in this application to the members of the selection committee, and to review my academic transcripts. I understand that the information contained in this form will be treated as confidential by the members of the selection committee. *
ank You'/Redirect Page
Your application form is now complete

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Your application form is now complete.
Please proceed to upload all the documents required.
Thank you.

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