



STEM Pipeline Mentorship Program Application

PERSONAL INFORMATION

LAST NAME: FIRST NAME:

EMAIL ADDRESS: PHONE NUMBER:

EDUCATION AND ACADEMIC INTERESTS

CURRENT EDUCATIONAL LEVEL

HIGH SCHOOL

UNDERGRADUATE STUDENT

GRADUATE STUDENT

WHAT STEM FIELD(S) ARE YOU MOST INTERESTED IN?

WHAT IS YOUR UNDERGRADUATE MAJOR OR GRADUATE FIELD OF STUDY (IF APPLICABLE)?



WHY ARE YOU INTERESTED IN PARTICIPATING IN THIS PROGRAM?

WHAT DO YOU HOPE TO GAIN BY PARTICIPATING?

WHAT DO YOU THINK YOU CAN OFFER THE PROGRAM? WHY WOULD YOU BE AN IDEAL PARTICIPANT?

AS OF NOW, DO YOU ANTICIPATE BEING ABLE TO ATTEND ALL OF THE PROGRAM EVENTS AND WORKSHOPS TENTATIVELY SCHEDULED FOR: SEPT. 12, 23; OCT. 20; NOV. 17; FEB. 16; MARCH 22; APRIL 23?