

Thank you for your interest in the Joaquin Bustoz Math-Science Honors Program at Arizona State University. This packet contains information and forms necessary to complete the application process.

The Joaquin Bustoz Math-Science Honors Program is intended for mature and motivated students who are interested in academic careers requiring mathematics, science, or engineering-based coursework and who are typically underrepresented in those fields of study. Selected participants include first-generation college bound students and students representing diverse backgrounds from high schools throughout the State of Arizona, including rural communities and the Navajo Nation.

Participants live on the Arizona State University (ASU) Tempe campus while enrolled in a university level mathematics course for college credit. Participants attend class six hours per day. Homework is assigned daily, quizzes are given twice a week, and tests are given weekly. Tutoring and problem solving sessions are provided in the evenings. A variety of academic presentations and activities are scheduled during each session. Tuition, room and board, textbooks, and classroom expenses will be provided.

Program Dates

8-Week Session: Monday, May 28 to Friday, July 20, 2012

The following four-credit university courses are offered during the eight-week session:

- MAT 270: Calculus with Analytic Geometry I
- MAT 271: Calculus with Analytic Geometry II

6-Week Session: Sunday, June 10 to Friday, July 20, 2012

The following three-credit university courses will be offered during the six-week session:

- AML 100: Introduction to Applied Mathematics for the Life and Social Sciences
- MAT 117: College Algebra
- MAT 170: Pre-Calculus

Mailing and Application Deadline Information

All application materials must be postmarked no later than **Friday, March 2, 2012.**

Please mail application materials to:

Joaquin Bustoz Math-Science Honors Program
Arizona State University
PO Box 871904
Tempe, AZ 85287-1904

Phone: 480-965-1690
Fax: 480-965-0333 (If faxed, please mail original)
E-mail: mshp@asu.edu
Website: www.asu.edu/mshp

A completed application packet includes the following:

- Application form with student and parent/guardian signatures.
- Personal & Career Statement summarizing family background, personal goals, academic/ career goals, and achievements.
- A letter of recommendation from a math or science teacher or counselor.
- Official high-school transcript including fall 2011 grades and spring 2012 coursework.
- Consent for access to education records form with two signatures.

Academics

The program is open to all high school sophomores, juniors, and seniors who qualify for Arizona in-state tuition (see residency requirement below) and who demonstrate the academic potential to pursue university studies in mathematics or science and who meet the following requirements:

- Must be enrolled in college-track courses.
- Have a cumulative GPA of 3.25 (unweighted).
- Earned at least "B" grades in high school math courses.
- Must have completed a minimum of **three** years of mathematics by the end of the 2011-2012 academic year.
- Must be at least a sophomore during the 2011-2012 school year.
- High-school seniors must have applied to and been accepted by Arizona State University prior to the application deadline and must be planning to attend ASU during the 2012 fall semester.

Residency Requirement

All applicants must qualify for in-state tuition in order to participate in the Joaquin Bustoz Math-Science Honors Program at ASU. Under Arizona law, students seeking in-state tuition status are required to have lawful presence in the United States. All of the following must apply in order to be classified as an Arizona resident for tuition purposes:

- Must have United States citizenship or permanent residency
- Valid Social Security Number
- Dependent on parent/guardian who is an Arizona resident; parent/guardian is eligible to claim student as a qualifying child for Federal tax and state tax purposes

The following information may also be applied in determining Arizona residency for tuition purposes:

- Member of an American Indian Tribe in Arizona or, a member of an American Indian Tribe whose reservation land lies in this state and extends into another state and who is a resident of the reservation
- Able to provide a valid AZ driver's license or state identification card

Placement Examination

Once selected, students are required to take a placement examination prior to the start of the program. The results of the examination are needed to both confirm the participation within the program and to determine the course in which they will be enrolled. Information regarding placement exams, including the test dates and locations, will be included in the initial notification packet.

Acceptance and Notification

The Joaquin Bustoz Math-Science Honors Program is unable to accept telephone calls regarding the status of student applications while they are being processed. Students will be sent a letter by mail regarding their acceptance status to the program during the last week of March.

Additional application forms can also be found and printed from our website: www.asu.edu/mshp.

Student Information

Male Female

First Name Middle Last

Mailing address: Street City State, Zip

Home phone E-mail

Age Birthdate (mm/dd/yy) Birthplace (City/ State)

Ethnicity African-American Asian Caucasian Hispanic
 Native-American _____ (Tribe) Other _____

Residency

Social Security Number: _____

US Citizen: Yes No

Permanent Resident: Yes No

Visa: Yes No If yes, Visa type: _____

If none of the above, please list other resident status: _____

Academic information

High School (School Name, City, State) Graduation Month and Year

Class Standing Fall 2011: Sophomore Junior Senior Other _____

Cumulative GPA: _____ Class rank: ____ out of _____

Summer 2012 Session and Course Preference(s):

Rank classes from 1 to 5, with 1 being your highest preference.

**Note: Course placement is based on student's individual placement test results.*

8-Week Session: May 28 to July 20, 2012 __MAT 270 __MAT 271
6-Week Session: June 10 to July 20, 2012 __AML 100 __MAT 117 __MAT 170

Past JBMSHP participation

Are you a past participant of the Joaquin Bustoz Math-Science Honors Program at ASU? Yes No

List Joaquin Bustoz Math-Science Honors Program courses taken and year : _____

Parent/ Guardian Information (Information is kept confidential)

Parent/ Guardian marital status (please circle)

Single Married Separated Divorced Widowed

I live at home with (please circle one): Both parents Father Mother

Other living arrangements: _____

Parent/ guardian #1

Name: First _____ Last _____ Male Female

Relationship to student _____

Mailing address: _____ Street _____ City _____ State _____ Zip _____

Home phone _____ Work phone _____ Cell phone _____

High School Graduate: Yes No
College Graduate: Yes No Degree: _____
Currently Employed: Yes No Occupation/Job: _____

Parent/ guardian #2

Name: First _____ Last _____ Male Female

Relationship to student _____

Mailing address: _____ Street _____ City _____ State _____ Zip _____

Home phone _____ Work phone _____ Cell phone _____

High School Graduate: Yes No
College Graduate: Yes No Degree: _____
Currently Employed: Yes No Occupation/Job: _____

Financial Information (all financial information is kept confidential)

Estimated Household income for year 2011: (please circle one)

\$30,000 or less \$30,001-50,000 \$50,001-75,000 \$75,001-100,000 Other \$ amount: _____

*(include all income earnings including: Social Security, disability, AFDC, retirement, investment, alimony, child support; for special financial circumstances please attach explanation)

How many people live in your household? _____

*(include yourself, brothers, sisters, parents, unmarried full-time students in college, & disabled dependents)

Of the number of people in your household, how many are children? _____

*(include yourself, children under 18, and any unmarried full-time students)

Do you or your family currently receive any of the following governmental or federal aid?:

- Unemployment Yes No
- WIC Assistance Yes No
- Nutrition Assistance Yes No
- AHCCCS Yes No
- Free or Reduced Lunch Yes No

Residency Information:

1. Do you consider yourself an Arizona resident for tuition purposes? Yes No
2. Since what date have you lived continuously in Arizona (Month/ year)? _____
3. Have you lived/ worked outside Arizona during the past year? Yes No
4. Are you a member of an American Indian tribe whose reservation lies wholly, or in part, in Arizona? Yes No
If yes, are you a resident of that reservation? Yes No Name of reservation _____
5. In which state did **you** file taxes in last year (2011)? _____ Two years ago (2010)? _____
* If you did not file taxes, please write "NONE"
6. In which state did **your parents** file taxes last year (2011)? _____ Two years ago (2010)? _____
* If you did not file taxes, please write "NONE"

Program Agreement (Student)

All of the information on my application is complete and accurate to the best of my knowledge. I understand that it is my responsibility to submit a complete application to the Joaquin Bustoz Math-Science Honors Program and follow all deadlines. **Incomplete, late, or inaccurate applications may result in my ineligibility.** I have read the application information and understand and accept all conditions of the Joaquin Bustoz Math-Science Honors Program.

Student Signature: _____ Date: _____

Print name: _____

Program Agreement (Parent or Legal Guardian)

I have read this application and the Joaquin Bustoz Math-Science Honors Program information; the information provided on the application is complete and accurate to the best of my knowledge. **I understand that incomplete, late, or inaccurate application information can result in ineligibility.** I consent to allow Arizona State University to verify student information contained in this application. I understand and accept the conditions of the Joaquin Bustoz Math-Science Honors Program.

Parent or Guardian Signature: _____ Date: _____

Print name: _____

Application Checklist

1. Application form (please complete **ALL** sections)
2. Personal and Career Statement. Please provide a one-page summary which addresses your:
 - a. Family and family background
 - b. Academic achievements
 - c. Personal achievements
 - d. Educational, college, and career goals
 - e. What you hope to gain by attending the Joaquin Bustoz Math-Science Honors Program, if selected.
3. Letter of Recommendation from a math or science teacher or counselor. Please provide a one-page summary on school letterhead which addresses your:
 - a. Mathematics, science, and/or academic qualifications
 - b. Personal attributes, including maturity and motivation
 - c. Family history, if known
 - d. College and career aspirations
 - e. Other information you feel relevant to the student's application.
4. Official high-school transcript including fall 2011 grades and spring 2012 coursework.
5. Consent for access to education records form (with two signatures)

Deadline and Mailing Address

All application forms must be postmarked by the deadline of **Friday, March 2, 2012.**

Please mail application materials to:

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E-mail: mshp@asu.edu
Website: www.asu.edu/mshp



*NOTE: Please sign both ① & ② below

CONSENT FOR ACCESS TO EDUCATION RECORDS OR PROXY

ARIZONA STATE UNIVERSITY
UNIVERSITY REGISTRAR'S OFFICE

Name of Student (Last, First, Middle Initial):	ASU ID Number:	Date:
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CONSENT FOR ACCESS TO EDUCATIONAL RECORDS

Access to educational records does not give permission to make changes to the student's record. For permission to make changes to a student's record see the Proxy: To Request Processing Of Transactions section below.

Check One:

One Time Use: This authorization can be used only once.

For One Time Use, Follow the Steps Below:

1. The student must complete this form, checking the One Time Use box above.
2. Then the student must provide the person they have chosen to give access to their records with this form.
3. The person requesting access to the student's records must present this form along with their own photo ID at the time they request the information.

Limited Use: This authorization expires on: December 31, 2012

Long Term Use: This authorization will remain continuously in effect until I withdraw this authorization in writing.

For Limited or Long Term Use, Follow the Steps Below:

1. The student must complete this form, checking either the Limited Use box and stating an expiration date, or the Long Term Use box above.
2. The student must then submit the completed form to any of the University Registrar's Office locations: Downtown campus/University Center Suite 130, Polytechnic campus/Administration Building, Tempe campus/Student Services Building Rm. 140, West campus/University Center Building Rm. 120; or mail it to University Registrar's Office, Arizona State University, PO Box 870312, Tempe, AZ 85287-0312; or fax it to (480) 965-7722.

①
Student Signature (SIGN) _____ Date _____

Cynthia Barragan Romero and/or Rebeca Ronstadt-Contreras
Name of Individual to Whom Access to Records May be Provided (please print or type)

Box 871904, ASU, Tempe, AZ 85287-1904 _____ Program coordinators
Address of Individual to Whom Access to Records May be Provided _____ Relationship to Student

PROXY: TO REQUEST PROCESSING OF TRANSACTIONS

Students unable to process transactions in person or using <http://my.asu.edu> may designate another person to process transactions on their behalf by proxy. In compliance with the federal Family Educational Rights and Privacy Act of 1974, also known as FERPA or the Buckley Amendment (synopsis available at <http://students.asu.edu/policies/ferpa.html>), the student must sign a release authorizing processing of transactions by proxy.

The student (not the proxy) has the ultimate responsibility for complying with applicable requirements, policies, and deadlines, and for the timely payment of tuition and fees.

I hereby authorize the person named below to serve as my proxy to process transactions at Arizona State University. My proxy may have access to any and all of my records that they request for the purpose of processing transactions. I understand that I am responsible for any decisions made by my proxy on my behalf. I also understand that I remain responsible for complying with all applicable requirements, policies, deadlines, and for the timely payment of tuition and fees, etc.

②
Student Signature (SIGN) _____ Date _____

Cynthia Barragan Romero and/or Rebeca Ronstadt-Contreras
Name of Proxy (please print or type)

Proxy Signature _____ Date 12/1/11