

CHICAGO STATE UNIVERSITY
MBRS-RISE Program

TILT PROJECT
May 31 – July 29, 2011

Student Application

Personal Information

Name (first, middle initial, last)	
CSU ID Number	900 - <input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Mailing Address:	
Phone #	
E-mail address (please print)	
Date & Place of Birth	_____ City: _____ State: _____ Country: _____ (mm/dd/yyyy)
Racial background? (check one or more)	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> African American <input type="checkbox"/> White <input type="checkbox"/> Do not wish to provide
Status:(check one)	<input type="checkbox"/> US Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Other
If "other" is circled, submit a copy of your visa.	

Academic Information

Current Academic Major	
Most recent biology class completed	
Most recent chemistry class completed	
Most recent physics class completed	

Summer 2011 Information

- Are you planning on being employed during June and July, 2011? Yes No
If yes, describe your working schedule for this period.

- Have you applied to, or have you been accepted to, any other program scheduled for June/July of 2011? Yes No If yes, list program name and decision date.

- Are you planning on taking a class that would meet during June 1 or July, 2011?
 Yes No If yes, please list class(es), institution(s) and meeting days/times.

- Do you have a vacation planned for June/July of 2011? Yes No
If yes, please list approximate dates and/or length of vacation.

Career Projections (please circle all applicable)

Projected year of graduation with B.S. degree	2012	2013	2014	2015
Post-B.S. Programs being considered	MD DC	PhD DO	EdD PharmD	DVM PT OT
If PhD considered, circle field	Chem. Microbiol.	Engineer. Biochem.	Physics Other	Math Physiol.
Projected post-degree employment	Physician Chemist	Engineer Physicist	University Professor Biologist	Other

Return the completed form to Dr. Warren Sherman, room SCI-309 or scan it and e-mail it to him at wsherman@csu.edu as a PDF attachment.