University of Washington Engineered Biomaterials
SCIENCE FOR SUCCESS
High School Science Outreach Program

The University of Washington Engineered Biomaterials (UWEB) is currently accepting applications for its summer June 30 – July 18, 2008 "Science for Success” (SFS) program for underrepresented minority/economically disadvantaged high school students in the Seattle area. The SFS program is funded by the National Science Foundation and is designed to encourage students toward a personal commitment to a career in science and to acquaint them with exciting research in the biological sciences, medicine, and the environment at the University of Washington. The Monday through Friday (9am to 4pm) program activities include: short field trips to wetlands, the arboretum, UW’s Pack Forest, Seattle Tilth, the UW botany greenhouse, the UW herbarium, the School of Fisheries, the Woodland Park Zoo and a local marine habitats. Hands-on laboratory experience in engineered biomaterials, human biology as well as a molecular biology component will be conducted. The program funds student supplies, lunch and a generous stipend but does not pay for transportation or lodging.

Who should apply?
- African American, American Indian/Alaska Native, Pacific Islander, Hispanic/Latino and/or economically disadvantaged students,
- Who will be enrolled in grade 10+ during the 2008 - 2009 school year and,
- US Citizens or permanent residents from the Seattle area

When?
June 30 – July 18, 2008, 9:00 am - 4:00 pm

Application materials must be sent in one envelope, which contains:
- (1) The "SFS" Program application
- (2) Typed 400 word essay
- (3) Official sealed transcript reflecting high school course work
- (4) Two SFS recommendation letters: one from applicant's high school math or science teacher and one from a person of your choice (i.e. employer/guidance counselor).

RETURN ALL OF THE APPLICATION PACKET by April 30 to:
Tekie Mehary, Ph.D.
SCIENCE FOR SUCCESS SUMMER PROGRAM
UWEB; Box # 355061
SEATTLE, WA 98195-5061

IMPORTANT NOTE: INCOMPLETE FILES OR FILES POSTMARKED AFTER application deadline April 30, 2008 WILL NOT BE CONSIDERED FOR THE PROGRAM. It is anticipated that the selection of all program participants will be completed no later than Monday June 4, 2008. For more information, please contact Dr. Tekie Mehary at (206) 221-7318 (Voice) or mehary@uweb. engr.washington.edu.
PROGRAM APPLICATION

APPLICANT INFORMATION

NAME: _________________________________________________________________

   Last name, first name (M I.)

MAILING ADDRESS:

________________________________________________________________________
________________________________________________________________________

LOCAL PHONE #:    ___________      E-mail:________________________________

DATE OF BIRTH: ____________ SOCIAL SECURITY #:___-___-_______

NAME & LOCATION OF HIGH SCHOOL:

________________________________________________________________________

GRADE LEVEL IN SCHOOL: ___________ GENDER (M/F): __________

ETHNICITY: ________________________________

Mother’s/guardian name: ________________________________________________

Occupation: ______________________ Work phone: ______________________

Father’s/guardian name: ________________________________________________

Occupation: ______________________ Work phone: ______________________
In about 400 words describe and discuss: why you would like to participate in the SFS program, what you will get out of it, and a scientific topic that interested you and would like to learn more about it.
UWEB HIGH SCHOOL "SCIENCE FOR SUCCESS' OUTREACH
RECOMMENDATION-FORM
(Confidential)

Please rate your observation and give a brief narrative on the applicant for the Science for Success Summer High School Minority Outreach Program at the UW. The SFS is designed to encourage students toward a personal commitment to a career in science and to acquaint them with exciting research in the biological sciences, medicine, and the environment at the University of Washington campus. Upon completion, please enclose in a sealed envelope and return to the student applicant so that the entire application packet will be mailed by April 30, 2008. Thank you!

EVALUATOR NAME: _____________________________________________________
Title: ___________________________ E-mail_______________________________
SCHOOL: _________________________________________________________________
ADDRESS: ________________________________________________________________

******************************************************************
SUMMARY OPINION please check the category in which you would place this applicant regarding his/her overall suitability as an applicant to this program.
_____ * Insufficient information or contact to evaluate applicant
_____ 4 An outstanding applicant
_____ 3 Above Average
_____ 2 Average
_____ 1 Slightly below average
_____ 0 Poor, not recommended
******************************************************************

Please rate the applicant's profile on the scale 0-4 (4 being the highest) by filling in the blanks, which correspond to each characteristic. Leave blank any section you feel unable to judge.

ANY SPECIFIC COMMENTS?

RELIABILITY: ________
MOTIVATION: ________
MATUREITY: ________
CURIOSITY: ________
INDUSTRY: ________
LEADERSHIP: ________
INTERACTION: ________
BEHAVIOR: ________
CREATIVITY: ________
RECOMMENDATION-NARRATIVE

(Please print or type)

NAME OF APPLICANT: _______________________________________________

   Last name, first name, MI

SCHOOL: ____________________________

DISTRICT: ____________________________

EVALUATOR: ____________________________

NARRATIVE: Please include in this space-limited section all pertinent information you have regarding the applicant. Of primary importance are your comments about: academic record, special strengths and weaknesses, ability to work with little or no supervision, extracurricular or employment activities; and applicant's long-term educational goals.

_____________________________________________ _____________________

EVALUATOR'S SIGNATURE      DATE
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_____________________________________________ _____________________
EVALUATOR'S SIGNATURE     DATE