



Utica Campus



UC³T STEM-UP INITIATIVE APPLICATION

ADMISSION REQUIREMENTS CHECKLIST

Applicants must apply to Hinds Community College-Utica Campus and to the UC³T STEM-UP Initiative. Admission to the UC³T STEM-UP Initiative is on a selective basis and determined by the following criteria:

- A recent high school graduate within the past year (no college transfers); Submit a current official high school transcript with GPA of 2.5 or higher; Submit an official ACT composite score of 17 or higher
- Apply to Hinds Community College-Utica Campus as a residential student
- Submit a Housing Application
- Submit the UC³T STEM-UP Application:

Option 1: Mail: Hinds Community College-Utica Campus, Attn: Mr. Xavier Reed
34175 Hwy 18, P.O. Box 1135, Utica, MS 39175

Option 2: Electronically: (Save filename as First Name + Last Name Application ex. John Smith Application and email to Xavier.Reed@hindsc.edu)

- Submit the personal statement with the application

Option 1: Mail: Hinds Community College-Utica Campus, Attn: Mr. Xavier Reed
34175 Hwy 18, P.O. Box 1135, Utica, MS 39175

Option 2: Electronically: (Save filename as First Name + Last Name Application ex. John Smith Application and email to Xavier.Reed@hindsc.edu)

- Three (3) Letters of Recommendation (Two from current high school STEM (science, technology, engineering and mathematics) teachers)
- Apply for financial aid by filing the Free Application for Federal Student Aid (FAFSA)



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Application Deadline is April 16.

Applicant Information-Please Print

Last Name: _____ First Name: _____ MI: _____

Date of Birth: _____ Gender: _____

Address: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Cellular Number: _____

Email: _____

Ethnicity: _____ Native Language: _____

Are you a United States citizen? Y or N

Are you a United States Resident? Y or N

Academic Information

High School Attended: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Year Entered 9th Grade: _____ Expected Graduation Date: _____ GPA: _____

Composite ACT Score: _____ ACT Math: _____ ACT Science: _____

Note: Mail a copy of ACT scores and high school transcript

Have you applied to Hinds? Y or N

Have you been accepted to Hinds Community College? Y or N

If yes, mail a copy of the acceptance letter.

Have you completed the FASFA form? Y or N

Have you taken or are you currently enrolled in any college preparatory courses? If so, list and give final grade.



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Please choose your area(s) of interest? Check all that apply.

Science _____ Technology _____ Engineering _____ Mathematics _____

Professional Career of Interest: _____

Extra-Curricular Activities, Honors, and Achievements

List any academic enrichment or extracurricular activities (hobbies, sports, clubs, etc.) in which you participated during the summer or academic year? Include any honors or awards received.

Statement of Interest

Discuss how your school experiences (K-12) contributed to your interest and enthusiasm for a STEM career. Describe how participating in the UC3T STEM-UP Project will help you achieve your career goals. Attach your statement to this application (at least one page but no more than two double spaced pages).

Questionnaire

Describe how you became interested in selecting your major?



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What are your primary reasons for applying for the grant opportunity?

How do you feel your special talents and skills are well suited for the program?

What will be the most challenging part of participating in the program to you? Why?

What are your future aspirations beyond the UC3T STEM-UP Initiative?

Applicant References

List names of the three individuals who will complete the recommendation forms on your behalf.

Note: Two (2) of the recommendation forms must be mathematics and science instructors. The DEADLINE is April 1st for accepting applications, as well as letters of recommendation. Request your letters of recommendation early in order to meet the deadline.

Name: _____ Title: _____

Email: _____ Contact Number: _____

Name: _____ Title: _____

Email: _____ Contact Number: _____

Name: _____ Title: _____

Email: _____ Contact Number: _____



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UC³T STEM-UP INITIATIVE APPLICATION

Recommendation Form #1: Section I

Hinds UC³T STEM-UP Initiative seeks applicants who demonstrate potential to succeed, contribute positively to the classroom environment, show passion about a STEM area career and will truly benefit from the opportunity.

Please complete sections I, II, III, and email as an attachment to Xavier.Reed@hindsc.edu with subject line: **Student First Name + Last Name Recommendation** (ex. John Smith Recommendation).

The deadline for submission is April 16.

Recommender: Please print the information requested below.

Recommender Name: _____

Position or Title: _____

Email: _____

Phone Number: _____ How long have you known this applicant? _____

Relationship to applicant: _____

In what capacity have you known this applicant?

How familiar are you with the quality of the applicant's work?

Please indicate which course(s) you taught the applicant.



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UC³T STEM-UP INITIATIVE APPLICATION

Recommendation Form #1:Section II

Please compose your candid thoughts about this applicant's ability to succeed in the STEM-UP Initiative addressing the following topics:

The applicant's strength and weakness in terms of knowledge, attitude, skills, and character:

The applicant's potential as a successful mentor, researcher, and leader:

The applicant's commitment to collaboration and service:

Why you believe the applicant will find academic success as an undergraduate in the STEM discipline?



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UC³T STEM-UP INITIATIVE APPLICATION

Recommendation Form #1: Section III

Please rank applicant's ability.

5= Exceptional 4= Superior 3= Average 2= Satisfactory 1= Improvement required 0= Not observed

	5	4	3	2	1	0
Possesses a working knowledge of basic skills and factual information	5	4	3	2	1	0
Completes homework and assignments in a timely manner	5	4	3	2	1	0
Completes any assigned tasks in a timely manner	5	4	3	2	1	0
Has a positive attitude in class, among peers, and adult's	5	4	3	2	1	0
Attends class regularly	5	4	3	2	1	0
Enjoys challenging problems, assignments, and issues	5	4	3	2	1	0
Makes rational decisions	5	4	3	2	1	0
Self-directed and independent, yet works well as part of a team	5	4	3	2	1	0
Respectful of others	5	4	3	2	1	0
Able to work under pressure	5	4	3	2	1	0
Clearly expresses thoughts orally and written	5	4	3	2	1	0
Plans and organizes activities, direct actions, and assess results	5	4	3	2	1	0
Works well independently with minimal supervision	5	4	3	2	1	0
Seems self-confident, happy and comfortable in most situations	5	4	3	2	1	0
Is receptive to new tasks or experiences; seems able to take risks	5	4	3	2	1	0

What is your overall recommendation of the applicant?

- Highly Recommend Recommend
 Recommend w/ reservation Not Recommend

Name _____ Title _____

Email _____ Contact Number _____



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UC³T STEM-UP INITIATIVE APPLICATION

Recommendation Form #2: Section I

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The deadline for submission is April 16.

Recommender: Please print the information requested below.

Recommender Name: _____

Position or Title: _____

Email: _____

Phone Number: _____ How long have you known this applicant? _____

Relationship to applicant: _____

In what capacity have you known this applicant?

How familiar are you with the quality of the applicant's work?

Please indicate which course(s) you taught the applicant.



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Recommendation Form #2: Section II

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The applicant's potential as a successful mentor, researcher, and leader:

The applicant's commitment to collaboration and service:

Why you believe the applicant will find academic success as an undergraduate in the STEM discipline?



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UC³T STEM-UP INITIATIVE APPLICATION

Recommendation Form #2: Section III

Please rank applicant's ability.

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	5	4	3	2	1	0
Possesses a working knowledge of basic skills and factual information	5	4	3	2	1	0
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What is your overall recommendation of the applicant?

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 Recommend w/ reservation Not Recommend

Name _____ Title _____

Email _____ Contact Number _____



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UC³T STEM-UP INITIATIVE APPLICATION

Recommendation Form #3: Section I

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The deadline for submission is April 16.

Recommender: Please print the information requested below.

Recommender Name: _____

Position or Title: _____

Email: _____

Phone Number: _____ How long have you known this applicant? _____

Relationship to applicant: _____

In what capacity have you known this applicant?

How familiar are you with the quality of the applicant's work?

Please indicate which course(s) you taught the applicant.



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UC³T STEM-UP INITIATIVE APPLICATION

Recommendation Form #3: Section II

Please compose your candid thoughts about this applicant's ability to succeed in the STEM-UP Initiative addressing the following topics:

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The applicant's commitment to collaboration and service:

Why you believe the applicant will find academic success as an undergraduate in the STEM discipline?



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UC³T STEM-UP INITIATIVE APPLICATION

Recommendation Form #3: Section III

Please rank applicant's ability.

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	5	4	3	2	1	0
Possesses a working knowledge of basic skills and factual information	5	4	3	2	1	0
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Completes any assigned tasks in a timely manner	5	4	3	2	1	0
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Attends class regularly	5	4	3	2	1	0
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Name _____ Title _____

Email _____ Contact Number _____