

2024 Project STRIDE II



(Students Training in Research Involving Disparity Elimination)

APPLICATION FOR 2024 Project STRIDE II Program June 17 - August 14, 2024*

Instructions:

Please complete the entire application. Save it, print a hard copy, sign it and scan and email the document to our team after you have completed it. We will need your transcript and two (2) letters of recommendation should also be emailed to the email addresses provided on this application.

Last Name	First Name	Middle Initial	_Social Security No. ((Last 4 digits)
Mailing Address:		City:	State:	Zip:
*	Cell No:			
Date of Birth:	Place of Birth:			
Height: Weight:	E-mail:			
University Currently Attendi	ng:	Current Classification:		
School Address:		Total G	PA:Scie	nce GPA:
What Science Courses have	you taken or are currently taking?	Please list:		
	e following (Gender Identity)	Please answer the following	owing (Ethnicity):	
☐ Female		 Please select one ☐ Hispanic or Latino 		
☐ Male		☐ Not Hispanic or Latin	10	
☐ Non-binary/ Non-co	onforming	□ Not Inspance of Eath	10	
☐ Transgender		2) Select all the apply		
☐ Prefer not to respon	nd	☐ American Indian or A	Alaska Native	
		☐ Asian		
			hinese 🗆 Filipino 🗆 🛚	-
•	eration college student?		other Not Listed:	
☐ Yes		☐ Black or African Am		
□ No		☐ Native Hawaiian or C	Other Pacific Islander	
		☐ White		
What is your household	l income?	☐ Other not listed (Plea	se specify below):	
<u>-</u>	,000-\$60,000 🗆 \$61,000-\$90	0,000 🗆 \$91,000- \$120,	000 🗆 \$120,000+ 🗆	Prefer not to answer
Case of an Emergency Please	e Notify			
Name:	Telephone No.:		Relationship:	_
Father's Name:		Occupation:		
Mother's Name:		Occupation:		
Name of Legal Guardian:		Occupation:		
No. of Brothers:		Ages:		
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Please list extracumicular activities (include school, community, health and/or church related):	
ist all employment information with Supervisor's name and date of employment.	
What are your hobbies and interests outside of school?	
What other summer programs are you applying to?	
What are your long-term education and career objectives?	
Describe all research projects you have done, the dates, and the name of your mentor.	
Do you have health insurance? Y_{es} N_{o} Insurance Provider:	Policy No.:



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Essay: Please limit your answer to 550 words.

	articipation in the program? How will it help you achieve your academic and career objectives?
Fill out t copies of	the application electronically, save and print the copy; sign the original, scan and email f the required materials to: projectstride@cdrewu.edu
quired De	ocument
1. 2. 3.	Official Transcript (sent directly from school) Two Letters of Recommendation - One letter must be from Faculty Member (Teacher or Counse Personal Statement- no more than 550 words.
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	All documents must be received no later than March 15th
	any questions, please feel free to e-mail Ms. Elizabeth Delgado at projectstride@cdrewu.edu
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