HIGH SCHOOL SUMMER PROGRAM

ALL MATERIALS POSTMARKED BY FEBRUARY 20th, 2016

Check list: before sending your application and materials,
Please, refer to the checklist below:

☐ Contact Information

☐ Academic Information

☐ Transcript of grades (may be sent separately by school)

☐ Three letters of recommendation, One from your
Science Coordinator

~Letters in sealed, individual envelopes must be
sent with the application form

☐ Self-Reported Standardized Test Scores

☐ Statement of Research Interests Filled Out

☐ Short Resume of Activities, Awards, and/or Scholarships (2
page max., typed)

☐ $20 Non-Refundable, Registration fee (check payable to
SUNY Stony Brook)

☐ And don’t forget to sign the forms!
INSTRUCTIONS:

Application:

Section I: Please TYPE all information and check for mistakes before submission. We will no longer accept hand-written applications.

Age Requirement: You MUST be at least 16 years old on or before July 4, 2016 to be considered for the program.

Section II: Please TYPE all information into this section of the form.

~ When reporting your GPA, please include the highest GPA that can be calculated by your school. For example, if your GPA was calculated to be 3.9 and your maximum possible GPA is 4.2, please report your GPA as 3.9/4.2.

~ If your school does not use/calculate GPA, please write "Does not calculate GPA" in the blank provided.

~ If your school does not calculate a weighted GPA, please leave that line blank.

Section III: Please TYPE all of your responses to the questions posed in this section. If you cannot fit your responses into the space provided, please feel free to attach additional, typed sheets to your application.

Transcript: Please request an OFFICIAL Transcript from your school's guidance or administrative department.

~ The transcript must have an official's signature or official seal of your school certifying it.

~ The transcript may be sent by your school separately if preferred.

When requesting your transcript, please ask your school to include grades and courses for all years completed (e.g., if you are applying as an 11th grader, please include transcript grades for courses completed in 9th and 10th grade and a list of your courses in progress for 11th grade).

If your transcript does not include your courses in progress, please include them on a separate sheet of paper.

Continued →
INSTRUCTIONS, continued:

Letters of Recommendation: All letters of recommendation must include the coversheet located within this application (Page 8). For students, please type/print your full name as it appears on your school's transcript to avoid confusion during the assembly of your application file.

~ The letters must be included with the application form, but each letter must be placed in its own envelope, sealed, and signed across the seal by the recommender.

Standardized Test Score Reports: We are not listed as a program under the Educational Testing Service's official list. To send your scores to our program -

~ Send a copy of your official report or screen capture of your official score with your application in the mail (see mailing address on last page of application).

Resume: Applicants may include a short resume (2 pages maximum, typed) highlighting academic achievements, school activity involvement, community service, and/or awards received.

Please do not include copies of award certificates, award letters, scientific/mathematical publications, or photographs of plaques/trophies with your application.
Summer Scholar Program 2016
June 27 – August 9

PLEASE TYPE!

I. Contact Information:

Name of Applicant (Last, First, Middle Initial)          Date of Birth
(Must be 16 years old on or before 07/04/2015)

Home address                                      City
State     Zip code

Home telephone number          Cell phone number          E-mail address

Parent / Guardian          Daytime phone          E-mail address

Parent / Guardian          Daytime phone          E-mail address

II. Academic Information: (Your official transcript must be included or mailed by your school)

High School ____________________________          School District___________________________
(if applicable)

Current Grade Level (Circle One):  9     10     11     12

Expected date of graduation ___________ Average (Unweighted) _____ / _____ Average (Weighted) _____ / _____

Please list the names and contact information of your references—**one MUST be from your Science Coordinator**, (Your three letters of recommendation must be included with your application. If more than 3 references are provided, please list additional names/contact information on a separate sheet of paper.)

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<thead>
<tr>
<th>Name</th>
<th>Subject Taught/Activity</th>
<th>Telephone</th>
<th>e-mail</th>
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2.    |                          |           |        |
3.    |                          |           |        |
III. Self-Reporting of Standardized Test Scores: Please fill in all scores for tests you have taken previously

**PSAT/NSQMT**

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<tr>
<th>Date Taken</th>
<th>Critical Reading</th>
<th>Math</th>
<th>Writing</th>
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**SAT I**

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<tr>
<th>Date Taken</th>
<th>Critical Reading</th>
<th>Math</th>
<th>Writing</th>
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**SAT II**

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<tr>
<th>Subject</th>
<th>Date Taken</th>
<th>Score</th>
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**AP/IB Scores**

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<th>Subject</th>
<th>Date Taken</th>
<th>Score</th>
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**ACT**

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<tr>
<th>Date Taken</th>
<th>Composite Score</th>
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IV. Research Information: (attach additional pages as needed)

Please explain your reasons for wanting to participate in the Garcia Center Summer Scholar Program.

List all previous research experience, including research-oriented courses you may have or are currently taking.

If you had the opportunity to do research in any area of engineering, what would you do?
I understand that this fellowship requires a full-time commitment. There will be no exceptions, except for medical or family emergencies. I understand that I must fulfill all program requirements, including weekly meetings, lab visits and submission of a research abstract based on my work.

Signature Student ________________________________

Signature Parent or Guardian ________________________________

Student Parent/guardian Guidance counselor
The State University of New York at Stony Brook does not discriminate on the basis of race, religion, national origin, age, disability, marital status, or status as a disabled or Vietnam-era veteran in its educational programs or in employment. Also, the State of New York prohibits discrimination on the basis of sexual orientation.

Please mail application, letters and transcripts to:

Dr. Adriana Pinkas-Sarafova
Department of Material Science and Engineering
Stony Brook University
216 Engineering Building
Stony Brook, NY 11794-2275

No Faxed Applications Will Be Accepted!

If you have any further questions regarding the program, call or email

Dr. Pinkas-Sarafova
garciaresearch@stonybrook.edu
Tel: 631-632-6097

***NOTE: PLEASE DO NOT SEND APPLICATIONS TO THE STONYBROOK ADMISSIONS OR SUMMER SESSIONS OFFICE BUT TO THE ADDRESS ABOVE***
Letter of Recommendation Coversheet

I. Student Applicant, please fill out this portion:

Student Name: __________________________________________

(Last, First, MI)

Student E-Mail: _________________________________________

High School: ______________________________________________

II. Mentor/Teacher, please fill out this portion:

Name: ______________________________________ Title: __________

E-Mail Address: ______________________________________ Phone #: __________

How long have you known this applicant?: __________

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<th>Initiative/Motivation</th>
<th>Below Average</th>
<th>Average</th>
<th>Above Average</th>
<th>Excellent</th>
<th>Superior</th>
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<td>Intellectual Curiosity</td>
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<td>Oral Communication</td>
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<td>Written Communication</td>
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<td>Creativity</td>
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<td>Energy</td>
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<td>Self-Confidence</td>
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<td>Leadership</td>
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<td>Responsibility</td>
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<td>Integrity</td>
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<td>Respect for Differences</td>
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<td>Warmth of Personality</td>
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<td>Emotional Maturity</td>
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<td>Reaction to Setbacks</td>
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III. Mailing Instructions:

Return this completed coversheet and your letter of recommendation in a sealed envelope to the student applicant

Application must be postmarked by February 20, 2016

IV. Questions or Comments: Please call 631-632-6097 or e-mail: GarciaResearch@stonybrook.edu