SIUC Illinois Louis Stokes Alliance for Minority Participation
Application

We are pleased to invite eligible undergraduates to apply for support through the Illinois Louis Stokes Alliance for Minority Participation (ILSAMP) program funded by the National Science Foundation. ILSAMP has the goal of increasing participation of undergraduates from underrepresented groups in science, technology, engineering, and math (STEM) disciplines. ILSAMP is not intended to be a scholarship or fellowship program.

Eligibility:
For a student to be eligible s/he must:
- Be enrolled at SIU Carbondale in a STEM major (see attached list for NSF-supported disciplines)
- Have a cumulative GPA of 2.25
- Be African American, Hispanic American, American Indian/Alaskan Native

Funds provided will be on a competitive basis for students to conduct research and/or attend professional meetings.

The SIU Carbondale ILSAMP program will also sponsor professional and academic enrichment activities throughout the academic year, and we will distribute information on these events as they are organized.

Questions? Please contact curca@siu.edu or 618-453-4433.

Application procedures:

Please submit the following to apply:

1. Completed ILSAMP application form
2. Copy of most current academic transcripts (unofficial transcripts accepted)
3. Description of proposed project
4. Letter of support and completed Faculty Recommendation Form from your faculty sponsor

Please return completed application to:

ILSAMP
Rodrigo Carramiñana, Ph.D
Student Services Building, Room 126, MC: 4730
Southern Illinois University
1263 Lincoln Drive
Carbondale, IL 62901
1. Personal Information (Please type or print)

Last Name ____________________________ First Name ____________________________ Middle Name ____________________________

Social Security # ____________________________ Date of Birth ____________________________ Dawg Tag # ____________________________

Current Mailing Address

Street Apt # ____________________________

City, State ____________________________ Zip Code ____________________________

Telephone Number ____________________________ Cell Phone ____________________________

Permanent Mailing Address

Street Apt # ____________________________

City, State ____________________________ Zip Code ____________________________

Telephone Number ____________________________

SIUC E-mail Address
(If you have not already done so, you need to activate your SIUC email account for participation in the LSAMP Program.)

Other E-mail Address ____________________________

Name and telephone of emergency contact: ____________________________

Gender: ____________________________

Female ____________________________ Male ____________________________

Citizenship: ____________________________

U.S. Citizen ____________________________ Permanent Resident ____________________________

Ethnicity: ____________________________

• African American ____________________________ • American Indian or Alaskan Native ____________________________ • Hispanic/Latino/Latina ____________________________ • Caucasian ____________________________ • Other: ____________________________

How did you become aware of the Louis Stokes Program? (Please circle all that apply)

• Email ____________________________ • Flyer ____________________________ • Faculty/Staff Member ____________________________ • Academic Advisor ____________________________ • Friend ____________________________ • Presentation ____________________________

• Letter ____________________________ • Other: ____________________________

Are you a McNair Scholar (circle one): Yes ____________________________ No ____________________________

2. Educational Information

Major ____________________________

Department ____________________________

Minor or Dual Major ____________________________

Classification at time of application: Freshman ____________________________ Sophomore ____________________________ Junior ____________________________ Senior ____________________________

Academic Advisor: ____________________________
3. Academic Record and Extracurricular Activities

Please submit a copy of your transcript from your current educational institution and all other colleges and universities you attended (unofficial transcript acceptable).

List previous research experience you had in a university setting or elsewhere (include name of program, institution, year, faculty mentor):

List honors, academic and extracurricular awards, and scholarships that you received:

List membership or participation in academic/campus organizations and activities:

List leadership positions you have held and leadership qualities you possess:
4. Proposed ILSAMP Project/Activities:

Attach a brief description of your research project that you and your mentor have discussed as appropriate for your participation in the SIU Carbondale ILSAMP. Use the Research Guidelines below to describe your project.

A. **Title:** A title that describes your conclusion or question in non-technical terms.

B. **Abstract:** A statement that gives a quick overview of your project. Include relevant background to provide a context for understanding the central question or theme of your project. Define acronyms if you use them, and avoid lab jargon. Be sure to cite literature when appropriate.

C. **Objectives, Aims, Goals, or Problem:** (If appropriate for your project) A concise statement of the goal, question, or problem. Include a hypothesis, if appropriate.

D. **Methods:** (If appropriate for your project) A brief description, diagram, or flow chart representing each key process or procedure used to test the hypothesis.

___________________________________________  ___________________
Signature of Applicant                          Date
5. FACULTY RECOMMENDATION:

TO STUDENT APPLICANT(S): Please print or type the information requested below, then give this form to your faculty sponsor. It is your responsibility to ensure that this signed form and a letter of support from your sponsor (sealed in an envelope) are included in your application.

STUDENT'S NAME:

FACULTY SPONSOR’S NAME and DEPARTMENT:

TO FACULTY SPONSOR: Please complete and sign this form and attach a letter of support. Letters should include (1) a candid and confidential assessment of the student’s ability to successfully complete the proposed research, (2) a discussion of your specific contributions to the project and your mentoring strategy, and (3) a statement of commitment of your time and appropriate resources to the project. The completed form and letter should be returned to the Center for Undergraduate Research and Creative Activities at Student Services Building, Room 126, Mailcode 4730. Do NOT submit this material electronically.

NOTE: By signing this form, you are agreeing to the following should the student be selected for participate in ILSAMP:

As faculty sponsor for this project, I attest that I have discussed and reviewed the research activity proposed by the above student and, to the best of my knowledge, this application was prepared in the student’s own words with only editorial input from me. I agree to: (1) assist and guide the student’s research activities on this project; (2) assist the student with preparation of all oral and/or poster presentations for the Undergraduate Creative Activities and Research Forum; (3) advise the student of his/her ethical responsibility to satisfy the conditions of the research participation, including obtaining all relevant compliance assurances and providing information on research integrity (plagiarism, falsification of data, etc.).

SIGNATURE: ___________________________________________ DATE: ________________

DEPARTMENT: ___________________________________________

PHONE #: ___________________________________________ E-MAIL: ____________________