Long Beach Bridges to the Baccalaureate (LB3) Program Application

California State University Long Beach
Summer Undergraduate Research Opportunity for Long Beach City and Cerritos College Science Majors

Application Deadline: Tuesday, February 27, 2018 by 4:00pm

Application Procedure and Checklist
To apply for the LB3 program, you must complete all the steps below and submit all of the documents listed below:

☐ Step 1 - Read over Program Description, Requirements and complete Bridges Application (Pages 1, 2 & 3).

☐ Step 2 - Include a 2-page (max) narrative describing the following:
  • Your academic preparation in science and mathematics. What motivated you to select a science major?
  • Describe your transfer plans after community college (i.e. schools you plan to transfer to and plans for graduate study).
  • Describe your short and long term career goals. How might Bridges help you achieve these goals?
  • Describe what you hope to gain from your participation in the Bridges program.

☐ Step 3 - Provide one (1) copy of transcript from each institution attended (unofficial copies are acceptable).

☐ Step 4 - Request two (2) recommendations from separate individuals using the Bridges to the Baccalaureate Recommendation Form provided.
  • Note: At least one of the recommendations must be from a faculty member in your major.
  • These recommendation letters should address following:
    o Your academic/professional achievement(s).
    o Your potential for becoming a scientist and/or researcher.

☐ Step 5 - Submit your completed application packet to your campus liaison; see information below.

  Cerritos College
  Matt Covill - Biology Department
  mmcovill@cerritos.edu; Office: S-115
  Linda Waldman - Chemistry Department
  lwaldman@cerritos.edu; Office: S-221

  Long Beach City College
  Mary Perrot - Physical Science Department
  mperrot@lbcc.edu; Office: D344
  Mehrzad Akhavan, Life Sciences Department
  makhavan@lbcc.edu; Office: D249

Program Description
• The Bridges to the Baccalaureate (LB3) Program is funded by the National Institutes of Health to increase the number of underrepresented/underserved students who transfer to four-year institutions and engage in biomedical research.
• Students conduct FULL-TIME summer research for the duration of the LB3 Program with a CSULB chemistry or biological science faculty mentor from June 7, 2018 through August 3, 2018.
• Students will earn an hourly wage for 40 hours work per week for the duration of the LB3 program.
• Participate in the program’s professional development seminars and career mentoring activities.

Admissions Requirements
✓ Have completed 24 semester units with a minimum 2.50 GPA
✓ Must be a U.S. Citizen or Permanent Resident
✓ Successful completion in some general science courses
✓ Biology and Chemistry majors preferred
✓ Member of underrepresented/underserved student populations
Application
Please print or type.

PERSONAL INFORMATION

<table>
<thead>
<tr>
<th>Last Name:</th>
<th>First Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>City/State/Zip:</td>
</tr>
<tr>
<td>Gender: □ Male  □ Female  □ Decline to state</td>
<td>Email:</td>
</tr>
<tr>
<td>I am a: □ U.S. Citizen  □ Permanent Resident  □ Other:</td>
<td>Current C.C. Campus ID#:</td>
</tr>
<tr>
<td>Phone Number:</td>
<td>Cell Phone:</td>
</tr>
<tr>
<td>Date of Birth: <em><strong><strong>/</strong></strong></em>/______</td>
<td>Alternate Email:</td>
</tr>
</tbody>
</table>

How did you hear about us?
□ Fliers/Posters  □ Course Instructor  □ Bridges Alumni  □ Academic Advisor  □ Website  □ Class Visit

DEMOGRAPHIC INFORMATION
Please indicate ALL the categories you identify with below.

□ American Indian

□ Black or African American

□ Hispanic or Latino

□ White/Caucasian

□ Other: ________________

□ Other: ________________

□ Other: ________________

Asian/Asian American: (select categories you identify with)

□ Chinese

□ Vietnamese

□ Pakistani

□ Filipino

□ Cambodian

□ Thailander

□ Japanese

□ H’Mong

□ East Indian

□ Korean

□ Laotian

□ Bangladeshi

□ Indonesian

□ Other: ________________

Pacific Islander: (select categories you identify with)

□ Native Hawaiian

□ Guamanian

□ Samoan

□ Fijian

□ Polynesian

□ Tongan

□ Micronesian

□ Tahitian

□ Marshallese

□ Melanesian

□ Other: ________________

OTHER PERSONAL INFORMATION

□ Yes  □ No - Do you and your family qualify under 2017 poverty level*?
  *As defined by HHS; check the HHS definition to answer this question: https://aspe.hhs.gov/poverty-guidelines

□ Yes  □ No - Are you the first in your immediate family to attend college?

What is the primary language spoken at home? List all languages spoken: ______________________________________

□ Yes  □ No - Do you have a diagnosed disability or impairment?
  If yes, please indicate: □ Hearing  □ Visual  □ Mobility  □ Other: ________________

□ Yes  □ No - Have you served in the armed forces?  If yes, indicate number of years served: _____________________

□ Yes  □ No - Do you identify as a career-changer?
  If yes, what was your previous career: ____________________________________________________________
**Name: ________________________________**

**ACADEMIC, EDUCATIONAL, & CAREER INFORMATION**

<table>
<thead>
<tr>
<th>Major:</th>
<th>Cumulative GPA:</th>
<th>Current Campus: □ Cerritos □ LBCC</th>
</tr>
</thead>
</table>

Have you applied to transfer for Fall 2018? □ Yes □ No

If you have not applied to transfer for Fall 2018; when do you plan to apply for transfer? □ Spring 2019 □ Fall 2019 □ Spring 2020 □ Fall 2020

What campuses have you applied or do you plan on applying to?

**California State University (CSU):**
- □ CSU - Long Beach
- □ CSU - Dominguez Hills
- □ CSU - Fullerton
- □ CSU - Northridge
- □ CSU - Los Angeles
- □ CSU - San Diego
- □ CSU - San Marcos
- □ CSU - San Jose
- □ CSU: ______________________

**University of California (UC):**
- □ UC - Los Angeles
- □ UC - Berkeley
- □ UC - Irvine
- □ UC - Santa Barbara
- □ UC - Riverside
- □ UC - San Diego
- □ UC - Davis
- □ UC - Santa Cruz
- □ UC - Merced
- □ UC - Merced

**Other Private:**
- □ Stanford University
- □ Claremont Colleges
- □ Chapman University
- □ Mt. St. Mary’s College
- □ Western University
- □ Other: ______________________
- □ Other: ______________________
- □ Other: ______________________
- □ Other: ______________________

**INSTITUTIONS ATTENDED**

Please list all universities, colleges, and community colleges; if necessary attach a separate page.

<table>
<thead>
<tr>
<th>Institution Attending/Attended</th>
<th>Degree/Major Program (e.g. Biology)</th>
<th>GPA</th>
</tr>
</thead>
</table>

**COMPLETED COURSEWORK**

Please list all you completed **math and science** courses in the appropriate boxes below.

<table>
<thead>
<tr>
<th>Course Taken</th>
<th>Course Instructor</th>
<th>Semester Completed</th>
<th>Grade</th>
</tr>
</thead>
</table>

**IN-PROGRESS COURSEWORK**

Please list your in-progress **science** courses in the appropriate boxes below.

<table>
<thead>
<tr>
<th>Course Taken</th>
<th>Course Instructor</th>
<th>Current Grade</th>
</tr>
</thead>
</table>
**HONORS / AWARDS**
If more space is needed, please list additional honors/awards on a separate sheet of paper and attach to this application.

<table>
<thead>
<tr>
<th>Name of Honor/Award/Recognition:</th>
<th>Awarding Entity:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location of Awarding Entity:</td>
<td>Year Received or Initiated:</td>
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**PREFERRED LAB EXPERIENCE**
Please check the appropriate box(es) to indicate which lab experience you prefer (select all that apply).

- [ ] Field lab experience: experience involves being outdoors collecting the data/materials as well as working inside the lab analyzing the data/materials collected.
- [ ] Lab experience involving primarily computational and/or computer based experiments: this type of experience involves a large amount of computer utilization and literature review.
- [ ] Lab experience involving primarily biological/chemical experiments inside the lab and involves technical work in a lab with specimens, liquids and reagents.
- [ ] I have no preference and am comfortable in any research setting.

**REFERENCES AND LETTERS OF RECOMMENDATION**
The Bridges Program requires two (2) separate letters of recommendation, using the attached *Bridges Recommendation Form*. Complete the information below for each of your recommenders. See attached for detailed directions about the Recommendation Form.

<table>
<thead>
<tr>
<th>Name of Recommender #1:</th>
<th>Institution: [□] Cerritos [□] LBCC</th>
<th>Department:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Taken with this Instructor:</td>
<td>Semester Taken:</td>
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<td>Phone:</td>
<td>Email:</td>
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<tr>
<td>Grade Received:</td>
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</table>

<table>
<thead>
<tr>
<th>Name of Recommender #2:</th>
<th>Institution: [□] Cerritos [□] LBCC</th>
<th>Department:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Taken with this Instructor:</td>
<td>Semester Taken:</td>
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<tr>
<td>Phone:</td>
<td>Email:</td>
<td></td>
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<tr>
<td>Grade Received:</td>
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</table>
Disclosure Statement

I understand that to track the progress and evaluate program effectiveness of the CSULB Bridges to the Baccalaureate Program requires access to student information. The Bridges to the Baccalaureate Program is required to report individual student data to the National Institutes of Health including social security number, ethnicity, GPA, disabilities, and enrollment status. Photographs and research abstracts may also be used by the Bridges to the Baccalaureate Program in materials such as websites, brochures and reports.

I have read and understand all of the statements above. I hereby authorize release and use of personal information for Bridges to the Baccalaureate Program, as described above. By signing below, I understand that this information is to be used solely for evaluating the impact and effectiveness of Bridges to the Baccalaureate Program and that individual student data will not be released to parties other than those directly involved with the program. I also understand that the Bridges to the Baccalaureate Program will require that I respond to the annual alumni survey in a timely manner. By signing below I am committed to provide the Bridges to the Baccalaureate Program annually with current information in order to provide the program with the needed data to support future students in this program.

Applicant’s Name (print, first & last): ____________________________________________________________________

Applicant’s Signature: ____________________________  Date: ___________________
Bridges to the Baccalaureate
California State University, Long Beach
Summer Undergraduate Research Opportunity for Long Beach City and Cerritos College Science Majors

Bridges Recommendation Form
National Institutes of Health: Bridges to the Baccalaureate Summer Research Program

All application materials must be received by **February 27, 2018**.

Student Name: ________________________________________   Student Signature: ____________________________

☐ I waive my rights to view this recommendation and attachments.

☐ I don’t waive my rights to view this recommendation and attachments.

*This recommendation must be submitted by the author directly to the faculty liaison listed in bold below.*

**Dear Evaluator,**

In an effort to increase the number and quality of science students transferring to four-year universities the National Institutes of Health and CSULB host the Long Beach Bridges to the Baccalaureate (LB3) Program for students from Cerritos and Long Beach City College for a nine-week summer internship. We teach them laboratory skills, time management and help develop their career goals.

The Bridges Committee depends on and appreciates your careful appraisal of the above named student’s potential. Your judgment about this student’s potential in his/her desired major and career is critically important. Your recommendation should include as much information as possible and remain confidential from the student. Please note any unusual circumstances in the comments section. A letter of support is optional; return all necessary documents to either **Mary Perrot (Office: D344)** or **Mehrzad Akhavan (Office: D249)** at Long Beach City College or **Matt Covill (Office: S-115)** or **Linda Waldman (Office: S-221)** at Cerritos College, by Tuesday, February 27, 2018. Please DO NOT return this form to students.

Thank you for your time.

Evaluator’s Name: ____________________________________________   Department: ______________________________

Email: ______________________________________________   Phone: _______________________   Office: ______________

<table>
<thead>
<tr>
<th>Rating</th>
<th>Academic Performance</th>
<th>Potential As a Scientific Researcher</th>
<th>Attitude &amp; Commitment to Learning</th>
<th>Lab Skills</th>
<th>Persistence in Tasks Not Immediately Rewarded</th>
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<tbody>
<tr>
<td>Outstanding</td>
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<tr>
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<td>Poor (explain)</td>
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<td>No Chance to Observe</td>
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Student’s Observed Strengths: _____________________________________________________________________________

_______________________________________________________________________________________________________

Student’s Observed Weaknesses: _____________________________________________________________________________

_______________________________________________________________________________________________________

Comments—all information is confidential. Your comments about the applicant’s scholarship, leadership, attitude, determination, ambition, financial need, etc., will be most helpful. Attach a separate sheet if necessary:

_______________________________________________________________________________________________________

_______________________________________________________________________________________________________

Evaluator Signature: ____________________________________________   Date: ____________________________
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Summer Undergraduate Research Opportunity for Long Beach City and Cerritos College Science Majors

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_________________________________________________________________________________________________________
_________________________________________________________________________________________________________

Evaluator Signature: ____________________________________________________________   Date: ____________________