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Department of Computer Science at the

**UNIVERSITY *of* HOUSTON**

and National Science Foundation

S-STEM: Scholarships for STEM Education

For Preparing Students for Global Challenges of the 21st Century

**APPLICATION for participation (Email to s-stem@cs.uh.edu)   
Application Deadlines:**

**For positions starting in Spring: Rolling, until positions are filled**

**For positions starting in Fall: Rolling, until positions are filled**

**Student Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student Name | First Middle Last | | | |
| E-mail Address |  | | | |
| 2nd E-mail Address |  | | | |
| Permanent Mailing Address |  | | | |
| Current School Address |  | | Student Status:  Full-time  Part-time | |
| Home Phone |  | School Phone | |  |
| UH ID/SSN |  | Mobile Phone  (if any) | |  |
| Colleges/Universities Attended (Name/City/State) |  | | | |
| Major |  | Minor (if any) | |  |
| Cumulative GPA |  | GPA in major | |  |
| Expected Graduation Date | Semester:  Spring  Summer  Fall  Year:  2014  2015  2016 2017 2018 2019 | | | |
| Gender | Male  Female | | | |
| Ethnicity/Race | Asian American  African American  Caucasian  Hispanic  Multi-Racial  Native American  Other | | | |
| **US Citizenship Status** | **Please attach proof** of your US citizenship or permanent resident status to this application. Only a US citizen, US permanent resident, a US national or a US refugee can participate in this program. We accept only copies of birth certificate/valid US passport/valid green card. | | | |

**Academic Information**

|  |  |  |
| --- | --- | --- |
| Classification: | | |
| Freshman | Sophomore | Junior  Senior |
| An official transcript (i.e., sent directly from your school) of your college work to date should be received by the Program Director by August 15 for Fall (December 10 for Spring), at the address: *S-STEM Program, c/o Program Director, Department of Computer Science, University of Houston, Houston, TX 77204-3359.* In addition, list the courses you are taking that are **not** listed on your transcript, using both course number and title. | | |
| List the honorary and professional societies of which you are a member, indicating offices held, as well as any extracurricular activities/organizations in which you participate. | | |

|  |  |
| --- | --- |
| Semesters attended UH: |  |
| Semesters in CS@UH: |  |
| Transferred from: |  |

|  |  |
| --- | --- |
| Industrial/Project Experience if any: |  |
| Are you currently working anywhere:  Yes  No | If yes, Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hrs/Week\_\_\_\_\_\_\_ Position: |
| Do you plan to work during studies: |  |
| Any other information you wish to share with the S-STEM committee |  |

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| (For transfer students in their 1st year at UH) Have you requested from your registrar that your official transcript be mailed to: ***S-STEM Program, c/o Program Director, Department of Computer Science, University of Houston, Houston, TX 77204-3010:***  Yes  No |

**Reference Information**

List two faculty members who will be submitting a letter of recommendation for your application in this program. The letters should be submitted via email to [s-stem@cs.uh.edu](mailto:s-stem@cs.uh.edu) or mailed directly to the S-STEM Program office within a week of application submission.

|  |  |
| --- | --- |
| Faculty Name | First Middle Last |
| Title |  |
| Department |  |
| Institution |  |
| Office Phone |  |
| E-mail Address |  |

|  |  |
| --- | --- |
| Faculty Name | First Middle Last |
| Title |  |
| Department |  |
| Institution |  |
| Office Phone |  |
| E-mail Address |  |

Please note that these scholarships are **need-based** and you must fill the FAFSA (Free Application for Federal Student Aid) and give your permission for the UH Financial Aid Office to share your need information with us. The scholarships also require the student to enroll **full-time** in a degree program.

I have answered all the questions above truthfully and completely. I will fill/have filled (**circle one**) the FAFSA and give my permission for the UH Financial Aid Office to share my need information with the S-STEM Program Director Prof. Verma. I also understand that I must be a full-time student to qualify for the scholarship.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_