

## Bridges to the Baccalaureate Program

**Lawson State Community College**  
3060 Wilson Road, SW  
Birmingham, AL 35221  
Attn: Tracey Wilson

**Jefferson State Community College**  
2601 Carson Road  
Birmingham, AL 35215  
Attn: Nicholas Kin

For Office Use Only

### APPLICATION FOR THE BRIDGES TO THE BACCALAUREATE PROGRAM

#### Biographical Data

Social Security Number

Application Date

Full Legal Name: Last

First

Middle

Permanent Address

Current Address

City/State/Zip

City/State/Zip

Country

County (Alabama Only)

Country

County (Alabama Only)

Home Phone

Work Phone

E-mail address

Sex

Male

Female

Are you a United States citizen or permanent resident?

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Yes

No

Race/Ethnic Background (Voluntary):

Asia

Black

Hispanic

Native American

White

Other

#### Education

Current Institution

Location

From/To

Major

Minor

Grade Point Average

\_\_\_\_\_ out of \_\_\_\_\_ (scale)

Expected Date of Graduation (Month and Year)

Classification

Freshman

Sophomore

Previous Institution

Location

From/To

Major

Minor

Grade Point Average

\_\_\_\_\_ out of \_\_\_\_\_ (scale)

Please check any of the areas of study that are of interest to you:

Biochemistry

Nutrition Science

Biology

Pathology

Biomedical Engineering

Pharmaceutical Design

Biophysics

Pharmacology

Cell Biology

Physics

Chemistry

Physiology

Computer Science

Psychology

Immunology

Sociology

Microbiology

Toxicology

Virology

Vision Science

Neuroscience (Behavioral, Cellular, Cognitive, Molecular, Systems)

Biostatistics

Epidemiology

Health Education/Health Promotion

Environmental Health

Materials Science

Other (please specify) \_\_\_\_\_

Please describe your career goals:

What advanced degree(s) do you plan to pursue?

Describe any research experience you have, particularly college research experience. Be concise. Describe the goals of the project, the major finding, and your contribution.

Do you have a preference for the type of laboratory you would like to work in or the type of project you would like to work on? If so, please describe:

Please list all college-level math and science courses you have completed to date and/or in which you are currently enrolled:

Course Name

Grade

Please have two people familiar with your academic accomplishments send letters of reference. These may be placed in sealed, signed envelopes and submitted with this application.

Signature

Date

Evaluation Form

Supporting the Bridges to the Baccalaureate Program



LAWSON STATE COMMUNITY COLLEGE

JEFFERSON STATE COMMUNITY COLLEGE

Instructions to Applicants

After completing the identifying information in the spaces below, please distribute forms to instructors and others you have asked to recommend you.

Social Security Number	Degree and Major Sought
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Applicant's First Name	Applicant's Middle Name	Applicant's Last Name
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Applicant's Physical Address
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Applicant's E-mail Address	Applicant's Phone Number
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In accordance with the Family Education Rights and Privacy Act of 1974, applicants may waive their right to see letters of recommendation. Please indicate your choice and sign on the appropriate line below. If you choose to retain your right, you may read this recommendation if you are accepted into the Summer Undergraduate Research Program.

- I waive my right to see this recommendation.
  I retain my right to see this recommendation

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Request to Evaluator

Evaluator:

How long and in what capacity have you known the applicant?

	Top 5%	Top 10%	Top 25%	Top 50%	Bottom 50%	No basis to judge
Motivation and Initiative						
Diligence and Perseverance						
Independence						
Creativity						
Dependability						
Integrity						
Verbal Clarity						
Writing Skills						
Research Ability						

Please complete both Pages.

