

# ACCESS

**A Bridge to University Science**

University of California ♦ Dept. of Chemistry & Biochemistry ♦ 1156 High St. ♦ Santa Cruz, CA 95064  
Phone: (831) 459-4606 ♦ [access@ucsc.edu](mailto:access@ucsc.edu)

## Membership Application

Thank you for your interest in the ACCESS program. We look forward to welcoming you as a new member. To become a member of ACCESS, please take a few minutes and complete the enclosed application materials. In addition to the ACCESS application, you are encouraged to complete the Free Application for Federal Student Aid (FAFSA) to determine your income status\*. Completing the FAFSA will help you plan the financing of your college education and make you eligible for a variety of scholarships and financial aid programs. A FAFSA can be obtained at your community college financial aid office. All other application materials should be returned directly to ACCESS.

### Checklist for ACCESS Membership:

Fill out all parts of the Membership Application \_\_\_\_\_

Fill out FAFSA completely and mail\* (optional) \_\_\_\_\_

Email application to the ACCESS Program \_\_\_\_\_

For More information about membership in the ACCESS Program contact:

University of California, Santa Cruz  
ACCESS Program  
Department of Chemistry and Biochemistry  
1156 High Street  
Santa Cruz, CA 95064  
e-mail: [access@ucsc.edu](mailto:access@ucsc.edu)  
Phone: (831) 459-4606  
Fax: (831) 459-4197

Please answer the following questions as accurately and completely as possible. Print neatly in blue or black ink.

**Personal Information**

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Female \_\_\_ Male \_\_\_ Birthdate \_\_\_\_\_

E-mail \_\_\_\_\_

Current Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_

Permanent Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Permanent Home Phone (if different) \_\_\_\_\_

Are you a U.S. Citizen? Yes \_\_\_ No \_\_\_ If not, do you have a legal right to work in the U.S.? Yes \_\_\_ No \_\_\_

**Check the ethnic group you most strongly identify with (check only ONE):**

African/African American/Black \_\_\_ Pacific Islander \_\_\_ Chinese/Chinese American \_\_\_

Mexican/Mexican American/Chicano \_\_\_ Filipino/Filipino American \_\_\_ Korean/Korean American \_\_\_

Other Spanish/Latino \_\_\_ Japanese/Japanese American \_\_\_ Other Asian \_\_\_

East Indian/Pakistani \_\_\_ Vietnamese/Vietnamese American \_\_\_ White/Caucasian \_\_\_

American Indian/Alaskan Native \_\_\_

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

**Education**

Last High School Attended \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

High School Diploma received? Yes \_\_\_ No \_\_\_ GED/High School Equivalency? Yes \_\_\_ No \_\_\_

College now enrolled \_\_\_\_\_ Major Course of study \_\_\_\_\_

Enrollment began: Semester: Spring \_\_\_ Summer \_\_\_ Fall \_\_\_ Winter \_\_\_ Year: \_\_\_\_\_

Units completed (at current college) \_\_\_\_\_ Units currently enrolled \_\_\_\_\_ Estimated GPA \_\_\_\_\_

**Other Colleges Attended**

Name	Dates Attended	Degree received/Units Completed
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Highest Degree Desired:**

No Degree Desired \_\_\_ Bachelors Degree \_\_\_ Clinical Doctorate (MD) \_\_\_ Combined Ph.D./MD \_\_\_

Associates Degree \_\_\_ Masters Degree \_\_\_ Research Doctorate (Ph.D.) \_\_\_ Other Professional Degree \_\_\_

Target Transfer Date: Semester: Spring \_\_\_ Summer \_\_\_ Fall \_\_\_ Winter \_\_\_ Year: \_\_\_\_\_

## **Additional information**

Career goals or interests:

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List any other academic programs (e.g. MESA, Puente, EOPS, EAOP, AVID, COSMOS, etc.) that you participated in (include dates)

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## **Signature and Authorization**

I agree to participate in the assessment of the ACCESS program by completing surveys and participating in focus groups and/or interviews regarding my perceptions and personal experiences in the program. I understand that all information will be treated as confidential by the researcher.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_