Student Researcher
Eligibility Application Packet

All services provided by CBESS are **FREE**.
Priority is given to completed applications submitted or postmarked by:

**November 16th.**

For questions, additional information, or if you would like to receive a copy of this application in Spanish, please contact us:

Raggio Research Center for STEM Education c/o CBESS
University of Nevada, Reno MS 0432
Reno, NV 89557
Phone: 775-682-7877
Fax: 775-327-2016
Email: cbess@unr.edu
Website: www.unr.edu/cbess

Application Checklist

Please use the checklist below before submitting the application to CBESS.

**Step 1:** To be considered for the CBESS program, you must submit a **COMPLETED Consent Form** and **Application Packet**, which includes:

- Signed Participant Consent and Parental / Guardian Permission
- Student Information
- Parent / Guardian Information
- Interest in STEM-healthcare, including three writing samples (details on page 4)
- Language Information
- Two completed Recommendation Forms from teachers or counselors

**Step 2:** Fax, or mail the last page of the **Consent Form** and your **Application Packet** to the CBESS office.

**Fax:** 775-327-2016
**Mail:** Raggio Research Center for STEM Education c/o CBESS
University of Nevada, Reno M/S 4432
Reno, NV 89557

**Step 3:** CBESS Personnel will review participant applications in winter. Selected participants will be notified of acceptance in February.
Application Packet

The application must be **printed neatly in blue or black ink**. Answer all questions; failure to do so will delay processing.

**Student Information**

Student Name: ___________________________ (Last) ___________________________ (First) ___________________________ (Middle)

Current Grade Level: ___________ High School: ___________________________ Current GPA: ___________

Mailing Address: ________________________________________________________________

(Street Address or P.O. Box)

(City) ___________________________ (State) ___________________________ (Zip Code) ___________________________

Student Phone Numbers: ( )_________________________ ( )_________________________

(Home Phone Number) ___________________________ (Cell Phone Number) ___________________________

Student Email Address: ___________________________________________________________

**Gender:** ___ Male ___ Female ___ Prefer not to say.

**Ethnicity:** Are you Hispanic or Latino?

___ No, not Hispanic or Latino.

___ Yes, Mexican, Mexican American, Chicano

___ Yes, Puerto Rican

___ Yes, Cuban

___ Prefer not to say

___ Yes, other Hispanic/Latino (please specify): ___________________________

**Race:** Check one or more to indicate your race identification.

___ Black or African American

___ White

___ Asian

___ American Indiano or Alaska Native

___ Native Hawaiian or Other Pacific Islander

___ Prefer not to say

___ Other not listed (please specify): ___________________________

**T-shirt:** What is your t-shirt size?

___ XS ___ S ___ M ___ L ___ XL ___ XXL ___________________________

**Willingness to participate:**

Are you willing to participate 4 Career Exploration Events with your parents? [ ] Yes [ ] No [ ] Not Sure

Are you willing to participate in a 3-week residential program from July 7th - July 26th at the University of Nevada, Reno? [ ] Yes [ ] No [ ] Not Sure

Are you willing to participate in monthly mentoring sessions? [ ] Yes [ ] No [ ] Not Sure

Are you willing to participate in an internship or volunteer work? [ ] Yes [ ] No [ ] Not Sure
List all co-curricular and other activities in which you are involved, both inside and outside of school. (HOSA organization, STEM-related career enrichment program, sports, clubs, student government, etc.)

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Do you qualify for free and reduced lunch?  Who do you currently live with?

___ No.  ___ Both parents.

___ Yes.  ___ One Parent.

___ I’m not sure.  ___ Other (please specify): __________________________

Total number of people living in your household (including parents): __________________________

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**Parent / Guardian Information**

<table>
<thead>
<tr>
<th>Parent / Guardian I</th>
<th>Parent / Guardian II</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Name:</td>
<td>Full Name:</td>
</tr>
<tr>
<td>Relationship to student:</td>
<td>Relationship to student:</td>
</tr>
<tr>
<td>Home Phone:</td>
<td>Home Phone:</td>
</tr>
<tr>
<td>Cell Phone:</td>
<td>Cell Phone:</td>
</tr>
<tr>
<td>Email:</td>
<td>Email:</td>
</tr>
</tbody>
</table>

**Education Completed: What is the highest level of education completed?**

___ Elementary School

___ Middle School

___ High School

___ Some College, but no degree

___ Associate Degree (2 year degree)

___ Bachelor’s Degree (4 year degree)

___ Master’s Degree

___ Doctorate (Ph.D.)

**Total annual income of all members of your household:**

___ $0-$9,9999

___ $10,000-$19,999

___ $20,000-$29,999

___ $30,000-$39,999

___ $40,000-$49,999

___ $50,000-$59,999

___ $60,000-$69,999

___ $70,000-$79,999

___ $80,000-$89,999

___ $90,000-$99,999

___ $100,000-$149,999

___ $150,000 or more
List all **science** and **math** courses you have taken in high school:

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

**Community Health**

Health is more than the absence of disease. Health and wellness seem to be an alignment of emotional, spiritual, physical, and mental wellbeing. A person's behaviors are influenced by friends, family, media, society, and environment among many other influencing factors. Think about your community – a community is a group you feel connected to such as your family, school, sports club, and race/ethnicity – what are the issues that affect the health of your community and what health issues are you interested in researching?

Write the topics below:

______________________________________________________________________________________________

_________ 

Are you interested in a career in healthcare?

____ No.

____ Yes, but I’m not sure what kind of healthcare job I want.

____ Yes, and I know what jobs interest me.

____ (please specify)

**Rate the following issues** based on your level of interest. 1 is the most interested, 5 is the least interested.

_____ Substance Abuse

_____ Women’s Health

_____ Reproductive Health

_____ Senior Health

_____ Mental Health

1. **Essay:** Why are you interested in STEM-healthcare? What are your career goals? Print and attach a Word Document (250 word maximum), or a hand-written copy of your essay. You may write your essay in either English or Spanish.

2. **Short Answer:**

Choose 2 of the following prompts. Answer one prompt in English, the other prompt in Spanish. Print a Word Document, or attach hand-written copies of your short answers. Each answer should be about **100 words**.

   A. Think about the last time you visited the office of a medical doctor or dentist. The visit could have been for yourself or if you were accompanying someone else to their appointment. If you had the opportunity, explain two things that you would like to have changed about that experience.

   B. Explain how friends or family members influence your health choices. How do you influence their health choices?

   C. Think about the last time you used a microscope during your biology classes in high school. Can you explain what biological sample you were analyzing? What more would you like to know about this sample? Why?
Language Information

Do you consider yourself bilingual in Spanish and English?

_____ No.

_____ Yes.

What languages are spoken at home? Check all that apply.

_____ English

_____ Spanish

_____ Other (please specify): ____________________________

Are you pursuing a Seal of Biliteracy on your high school diploma? (The Nevada State Seal of Biliteracy recognizes public high school graduates who have attained a high level of proficiency in speaking, reading, and writing in one or more world languages in addition to English.)

_____ Yes, I am pursuing a Seal of Biliteracy for Spanish.

_____ No, I am not.

_____ I’m not sure.

Self-Assessment of Bilingualism - Circle your answer / Check your answer

I can explain a scientific process in English.

Strongly Disagree _____ Disagree _____ Disagree _____ Agree _____ Agree _____ Agree

I can explain a scientific process in Spanish.

Strongly Disagree _____ Disagree _____ Disagree _____ Agree _____ Agree _____ Agree

I can create a lab report based on an experiment done in class in English.

Strongly Disagree _____ Disagree _____ Disagree _____ Agree _____ Agree _____ Agree

I can create a lab report based on an experiment done in class in Spanish.

Strongly Disagree _____ Disagree _____ Disagree _____ Agree _____ Agree _____ Agree

I can read and understand a newspaper article in English.

Strongly Disagree _____ Disagree _____ Disagree _____ Agree _____ Agree _____ Agree

I can read and understand a newspaper article in Spanish.

Strongly Disagree _____ Disagree _____ Disagree _____ Agree _____ Agree _____ Agree

I can understand important information from presentations or lectures in English.

Strongly Disagree _____ Disagree _____ Disagree _____ Agree _____ Agree _____ Agree

I can understand important information from presentations or lectures in Spanish.

Strongly Disagree _____ Disagree _____ Disagree _____ Agree _____ Agree _____ Agree
Did you complete all of the steps?

Did you….

…and your parent/guardian carefully read and sign the Consent Form?

…complete all questions in the “Student Information,” “Interest in STEM-healthcare,” and “Language Information” sections?

…and your parent/guardian complete all questions in the “Parent/Guardian Information” section?

…attach 1 essay about your interest in health care (in Spanish or English)?

…attach 2 short answer responses about science / healthcare (one prompt in English, and one prompt in Spanish)?

…attach 2 Teacher/Counselor Recommendation Forms, or have your teachers/counselors fax or mail their forms?

…fax, or mail the last page of the Consent Form and your Application Packet to the CBESS office on or before November 16th.

Fax: 775-327-2016

Mail: Raggio Research Center for STEM Education c/o CBESS
University of Nevada, Reno M/S 4432
Reno, NV 89557
CBESS Teacher / Counselor Recommendation Form I

Please give this form to a current teacher or counselor at your school to complete.

Student’s Name: 

Current Grade Level: High School: 

Teacher / Counselor’s Name: 

Teacher / Counselor’s Signature: Date: 

How long have you known the applicant? 

What content area do you teach? 

The above student is applying to the Community of Bilingual English-Spanish Speakers (CBESS) program. Your response to the following will help us determine if the candidate will benefit from the CBESS program. If you would prefer to keep the recommendation confidential, you may fax, or mail us your letter. Otherwise, the student may attach the letter to his/her Application Packet.

Please check the qualities, which best describe the commitment, talent, and skills of this student:

( ) Participates regularly in class discussions and activities
( ) Shows interest in learning and seeks academic challenge
( ) Is punctual and completes assignments on time
( ) Capable of performing at higher personal and academic level
( ) Demonstrates leadership abilities
( ) Is organized and uses time effectively
( ) Is responsible, self-directed and can work independently
( ) Desire to pursue education beyond high school

Please evaluate the student’s current overall performance by circling one rating for each category:

Attendance / Tardiness: 

Classroom Attitude: 

Class Work: 

Classroom Behavior: 

Social Skills: 

Work Ethic: 

Motivation: 

excellent  good  fair  poor  inconsistent
Based on my experience with the applicant, my recommendation to the CBESS Program is as follows:

( ) Highly Recommend  ( ) Recommend  ( ) Recommend with Reservation  ( ) Do Not Recommend

Please describe why this student would benefit from the CBESS program.

_____________________________________________________________________________________________
_____________________________________________________________________________________________
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Please describe the commitment of the student and his/her family to academic success.

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Additional comments or information you’d like to share about this student.

_____________________________________________________________________________________________
_____________________________________________________________________________________________
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Please fax or mail this recommendation to:

Raggio Research Center for STEM Education c/o CBESS
University of Nevada, Reno M/S 4432
Reno, Nevada 89557
Phone: (775) 682-7877
Fax: (775) 327-2016
Please give this form to a current teacher or counselor at your school to complete.

Student’s Name: ____________________________________________
Current Grade Level: ___________________________ High School: ____________________________
Teacher / Counselor’s Name: ____________________________________________
Teacher / Counselor’s Signature: ____________________________ Date: ________________________
How long have you known the applicant? ____________________________________________
What content area do you teach? ____________________________________________

The above student is applying to the Community of Bilingual English-Spanish Speakers (CBESS) program. Your response to the following will help us determine if the candidate will benefit from the CBESS program. If you would prefer to keep the recommendation confidential, you may fax, or mail us your letter. Otherwise, the student may attach the letter to his/her Application Packet.

Please check the qualities, which best describe the commitment, talent, and skills of this student:

(   ) Participates regularly in class discussions and activities
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(   ) Is punctual and completes assignments on time
(   ) Capable of performing at higher personal and academic level
(   ) Demonstrates leadership abilities
(   ) Is organized and uses time effectively
(   ) Is responsible, self-directed and can work independently
(   ) Desire to pursue education beyond high school

Please evaluate the student’s current overall performance by circling one rating for each category:

Attendance / Tardiness: excellent good fair poor inconsistent
Classroom Attitude: excellent good fair poor inconsistent
Class Work: excellent good fair poor inconsistent
Classroom Behavior: excellent good fair poor inconsistent
Social Skills: excellent good fair poor inconsistent
Work Ethic: excellent good fair poor inconsistent
Motivation: excellent good fair poor inconsistent
Based on my experience with the applicant, my recommendation to the CBESS Program is as follows:

( ) Highly Recommend    ( ) Recommend    ( ) Recommend with Reservation    ( ) Do Not Recommend

Please describe why this student would benefit from the CBESS program.
_____________________________________________________________________________________________
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Please describe the commitment of the student and his/her family to academic success.
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Additional comments or information you’d like to share about this student.
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