San Jose State University Scholars in Science Program Application Student Information Sheet

(Please write clearly and fill out completely! An incomplete application will delay its review!)

Name:				Date:	
Name: Last	First		MI		
Soc. Sec. No.:			SJSU ID:		
Are you a US Citizen or le	gal resident?	Yes	No		
Mailing Address:			•		
Phone:		Class:		Soph Jr	
email address:					
Name of High School:					
City, State of High School				_ Year gradua	ated:
At what university or com					r of college? JSU:
Minor (if any):	Cumulative, all college GPA				
Other Colleges Attended Name			Degree	•	GPA
% of college expenses earn	ed:	_ How?			
Work Experience Company				hrs/wk	Dates
	-				