Application Deadline: June 16, 2006
If you need more space, please feel free to attach a typed sheet to your application.

Name: ____________________________
Address: __________________________
City, State, Zip: ____________________
Phone: ____________________________
Email: ______________________________
Date of Birth: ______________________
Social Security Number: ______________
SAT/PSAT Verbal Score: ______________
High School: ________________________

Will you be staying with us on campus or commuting? _____________________________

What are your main academic interests?

What are your main extra-curricular activities?

Optional: How would you describe yourself?
- African American
- Asian/Pacific Islander
- Hispanic
- Native American
- White/Anglo/Caucasian (non-Hispanic)

How did you hear about the Summer Scholars Program? ____________________________

Please provide a TWO PAGE, TYPED ESSAY (double spaced) describing yourself, your extracurricular activities, your academic interests, and your college/university aspirations. Please include the reasons that you feel this program will help you in achieving your personal and academic goals.

If you are interested in receiving a scholarship to attend this program, please provide an additional ONE PAGE, TYPED ESSAY explaining your interest for attending the Summer Scholars Program. Scholarships will be granted to those who express interest in need. Amount of scholarship awarded will be between $100 and $300. Scholarships are not guaranteed.

Please also provide one letter of recommendation from a teacher, coach, supervisor, or someone else who knows about your abilities. Please send these to: Kim Misevis, Program Manager, Summer Scholars Program 2006, 163 William St., 21st Floor, Pace University, New York, NY, 10038. These must arrive on or before June 16th, 2006.

Parent/Guardian Information
Name(s): ____________________________
Address: ____________________________
Home Telephone: ____________________
Person responsible for tuition______________

Work Telephone: ______________________
Occupation(s): _______________________
Work Address: ________________________
Contact Telephone: ___________________

Signature of Student_________________________ Date: _______________
Signature of Guardian________________________ Date: _______________