

CONTACT INFORMATION

CSTEP Application	
(Please Print Clearly)	

Campus: Morrisville Norwich Summer Wired Date: First Name: _____ Middle Initial: _____ Last Name: _____ Preferred Name: _____ I identify my gender as: _____ Phone: Morrisville Email: ______ Secondary Email: ______ Local Address (if different)

Stree	t		Stree	et	
	NY			NY	
City	State	Zip	City	State	Zip

CSTEP QUALIFYING INFORMATION

M#: _____ Birthday:

Home Address

Campus Address (Residence Hall):

Are you a New York State Resident? Yes / No			
Race/Ethnicity: Alaskan Native or Native American	Asian*	*Must demonstrate	
Black or African American	Hispanic or Latino	economic disadvantage, to be verified by	
Native Hawaiian or Pacific Islander*	White*	2	
Current Major:	Degree Pursuing:	Associate Bachelor	
Anticipated Graduation Semester and Year:	Current Cumulative GPA:		
Intended Career:			
Intended Career:			
GENERAL DATA		/ No	
GENERAL DATA How did you learn about CSTEP?	bachelor's degree? Yes	-	
GENERAL DATA How did you learn about CSTEP? Do you have a parent or legal guardian who completed a	bachelor's degree? Yes with LPP? Yes / No We	ere you in STEP? Yes / No	

Name of High School:		Graduation Date:			
	Previous Colleges	Dates Attended	Full/Part-time	CSTEP Member	
1.					
2.					
3.					

Information Release

I, ______, (print) agree to comply with the guidelines of The Collegiate Science and Technology Entry Program (CSTEP) at SUNY Morrisville. I also allow CSTEP to access records to complete the application process.

I hereby grant to SUNY Morrisville the absolute and irrevocable right and permission in respect to information gathered from me during an interview as well as photographs taken of me or in which I may be included with others; to copyright the same in the college's name or otherwise; to use, reuse, publish and republish the same in whole or in part, individually or in conjunction with any printed matter or other photographs in any and all media, including on the Morrisville website, and/or social media spaces now or hereafter known for any purpose whatsoever including but not limited to illustration, art, advertising, trade, and/or promotion.

I hereby release and discharge the college from any and all claims and demands arising out of or in connection with the use of information and/or photographs, including without limitation any and all claims for libel or invasion of privacy. This authorization and release shall also insure to the benefit of the heirs, legal representatives, licensees or assigns of the college. I have read the above and fully understand the contents thereof. This release shall be binding upon me, my heirs, representatives and/or assigns.

Signature

Date

PLEASE EMAIL COMPLETED APPLICATION TO:

cstep@morrisville.edu

OR RETURN TO:

Collegiate Science & Technology Entry Program, SUNY Morrisville, PO Box 901, Morrisville, NY 13408

Funding is supported by a grant from the New York State Education Department. If you have any questions, please contact the CSTEP Office (315) 684-6009.