



# Application for 2018-2019

Carefully read and complete the information below.

## 1. STUDENT DATA

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Cellular Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Are you a resident of New York State?  Yes  No

Ethnicity:  Black/African American  Hispanic/Latino

American Indian/Alaska Native  White\*  Asian/Pacific Islander\*

Other: \_\_\_\_\_

\*Economic eligibility must be documented according to State Education Department requirements prior to admission to the program. Please provide \_\_\_\_\_.

Where did you learn about the STEP program? (check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Referral from a STEP student              | <input type="checkbox"/> Big Picture School Staff                         |
| <input type="checkbox"/> Teacher                                   | <input type="checkbox"/> Family Member                                    |
| <input type="checkbox"/> Guidance/School Counselor                 | <input type="checkbox"/> Member of the Onondaga Nation                    |
| <input type="checkbox"/> School Staff (Principal, Librarian, etc.) | <input type="checkbox"/> Publicity (i.e. Signs, Facebook, pamphlet, etc.) |
| <input type="checkbox"/> Coach                                     | <input type="checkbox"/> Open House for the STEP Program                  |
| <input type="checkbox"/> STEP Staff                                |   |

## 2. EDUCATIONAL INFORMATION

Science and Technology Entry Program (STEP) ■ Morrisville State College and LaFayette Central School District ■  
5955 Route 20 West ■ LaFayette, New York 13084

*Grant Funded by the New York State Department of Education*

School Name: \_\_\_\_\_

Grade for 2016-2017:    7<sup>th</sup>       8<sup>th</sup>       9<sup>th</sup>       10<sup>th</sup>       11<sup>th</sup>       12<sup>th</sup>

Guidance Counselor: \_\_\_\_\_

**3. HOBBIES/ INTERESTS/ AWARDS**

\_\_\_\_\_  
\_\_\_\_\_

**4. FAMILY INFORMATION**

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Address: \_\_\_\_\_  
\_\_\_\_\_

Home Telephone: (      ) \_\_\_\_\_      Work Telephone: (      ) \_\_\_\_\_

**5. STUDENT AGREEMENT**

I, \_\_\_\_\_, understand that continued participation in the Science and Technology Entry Program (STEP) requires a commitment that I attend the program sessions **regularly and on time**. I also agree to accept tutoring upon recommendation of STEP staff, cooperate with instructors, tutors and administrative staff, and participate in field trips, workshops and other events. I will present myself as future professionals at all times, this include speech, attitude and behavior.

Student's Signature: \_\_\_\_\_      Date: \_\_\_\_\_

**6. PARENT AGREEMENT**

I/We \_\_\_\_\_ give permission for  
Parent's or Guardian's Names

\_\_\_\_\_ to participate in the Science and Technology Entry Program  
Student's Name

(STEP) as a part of the Lafayette School District and Morrisville State College. I also will support and actively participate in STEP's efforts to prepare my student for college.

Parent's/Guardian's Signature: \_\_\_\_\_      Date: \_\_\_\_\_

Parent's/Guardian's Signature: \_\_\_\_\_      Date: \_\_\_\_\_

**Return application to:**