K-STATE MAPS APPLICATION CHECKLIST

PLEASE MAKE SURE YOU COMPLETE EVERYTHING LISTED ON THIS CHECKLIST. YOUR APPLICATION WILL NOT BE CONSIDERED UNTIL IT IS COMPLETE.

___ 1. Complete the student and family information forms in Parts I and II.

___ 2. Include three (3) completed recommendation forms in sealed envelopes. In Part III of the application, there is one recommendation form for each of the following: (1) a Science or Math teacher; (2) a non Science or Math teacher; and (3) a community official who knows you well (examples of community officials are coaches, church/religious leaders, guidance counselors, and supervisors). Recommendations should be from teachers that can accurately evaluate your abilities. Do not ask family members to write your recommendations. Failure to provide all three recommendations will hinder your chances of being accepted. If your recommenders want to send their recommendations directly to our office, please see the address below.

___ 3. In your own words, write all three of your student essays for Part IV. Please take care in writing your essays. The essays and recommendations are the most important part of your application. Essays should be neatly typed in black ink. Feel free to use or attach additional sheets of paper.

___ 4. Part V requests that you include a copy of your most recent high school transcript that includes your ACT or SAT scores. You also need to sign that sheet.

___ 5. Completed applications should be mailed to:

MAPS-The Project IMPACT Summer Bridge Program
c/o – Brandon L. Clark
224 Anderson Hall
Kansas State University
Manhattan, KS 66506-0101

APPLICATION DEADLINE: POSTMARKED BY MARCH 6, 2015.

NOTE: Make sure the application has all the necessary signatures, including your signature, on the academic records sheet.

An application missing any of the above will be considered incomplete.

Only complete applications will be accepted for review.

The selection committee will make the final decision on MAPS participants and applicants will be notified by April 10, 2015. Accepted students will need to confirm their participation in the program by April 17, 2015. If you have any questions regarding your application packet, please contact Brandon at (785) 532-6436 or fax (785) 532-6339.
Part I – GENERAL INFORMATION (Please print clearly in black ink.)

STUDENT INFORMATION

Name: ___________________________________________  Preferred Name: ______________________

Social Security Number: ___________________________  Date of Birth: __________________________

Age: ___________________________  Gender: Male _____ Female _____

Address: __________________________________________

City/State: ___________________________  Zip: ___________________________

Home Phone: (______)_________________________  Cell phone: (______)_________________________

Email: ___________________________________________

Ethnic group:  __ American Indian/Alaskan Native  __ Biracial
  __ Asian or Pacific Islander  __ White/Non-Hispanic
  __ Black, Non-Hispanic  __ Other
  __ Hispanic/Spanish/Latin American  __ I prefer not to respond
  __ Mexican/Mexican American

Intended major at K-State: __________________________________________

Current School: __________________________________________

School Address: ___________________________  School Phone: (______)_________________________

City/State: ___________________________  Zip: ___________________________

Are you currently enrolled in a college preparatory curriculum at your school?  Yes/No: ______

Current grade point average: ___________  Anticipated graduation date: ______

Do you currently have a job? __________________________________________

If accepted, do you know now that you will have commitments which might conflict with MAPS? ______

I understand that, if accepted into MAPS, I will be part of Project IMPACT which is an academic
program that will track and support my academic progress beyond the summer and six (6) years
into my college career.

Yes: ______  Not clear: ______

I HEREBY AFFIRM THAT ALL INFORMATION CONTAINED IN THIS
APPLICATION IS TRUE, TO THE BEST OF MY KNOWLEDGE.

__________________________________________
APPLICANT SIGNATURE
Part II – FAMILY INFORMATION, EDUCATION

Please list below only those who are currently living with the applicant and providing financial assistance.

Guardian’s Name: ________________________________ Ethnicity: ________________________________

Address: _______________________________________ Cell: (___) ___________

City/State: ___________________________ Zip: _______ Email: ________________________________

Highest educational level completed:

- No college
- Some college
- Associate’s Degree
- Bachelor’s Degree
- Master’s Degree
- Ph.D.
- Post-graduate work
- Other professional degree (M.D., D.D.S., D.V.M.)
- I don’t know
- Other: ________________________________

Guardian’s Name: ________________________________ Ethnicity: ________________________________

Address: _______________________________________ Cell: (___) ___________

City/State: ___________________________ Zip: _______ Email: ________________________________

Highest educational level completed:

- No college
- Some college
- Associate’s Degree
- Bachelor’s Degree
- Master’s Degree
- Ph.D.
- Post-graduate work
- Other professional degree (M.D., D.D.S., D.V.M.)
- I don’t know
- Other: ________________________________

Is a language other than English spoken in the home? Yes/No: ________________________________

If yes, please specify: ________________________________

K-SHARE NOTICE OF NONDISCRIMINATION
Kansas State University is committed to nondiscrimination on the basis of race, sex, national origin, disability, religion, age, sexual orientation, or other non merit reasons, in admissions, educational programs or activities and employment (including employment of disabled veterans and veterans of the Vietnam Era) as required by applicable laws and regulations. Responsibility for coordination of compliance efforts and receipt of inquiries concerning Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and the Americans With Disabilities Act of 1990, has been delegated to Roberta Maldonado-Franzen, Director of the Office of Institutional Equity, Kansas State University, 103 Edwards Hall, Manhattan, KS 66506-0124, (Phone) 785-532-6220; (TTY) 785-532-4807.
Part III – RECOMMENDATION: TEACHER – SCIENCE OR MATH

The MAPS Program at Kansas State University is a 6-week summer bridge program that offers summer academic preparation for freshmen entering an agriculture, business, or engineering curriculum. African American, Asian American, Latino, and Native American students who will enroll at K-State in Fall 2015 may be selected to participate in the program after their high school graduation. Admission to the program is highly competitive. MAPS looks for students who genuinely possess the potential to prepare for and succeed in a college education in agriculture, business, or engineering. Your accurate and candid appraisal of the applicant will be closely examined during the student selection process. Additional pages may be attached.

Applicant Name: ____________________________________________

Recommender Name: _________________________________________

1. How long and under what circumstances have you known the applicant?

2. Please check and give examples of the applicant's attitude towards school and education.
   o Above average
   o Average
   o Below average

3. Please check and give examples of the applicant's intellectual ability?
   o Above average
   o Average
   o Below average

4. Please check and give examples of the applicant's ability to communicate?
   o Above average
   o Average
   o Below average

5. Please check and give examples of the applicant's mathematical ability?
   o Above average
   o Average
   o Below average

6. Does the applicant exhibit classroom leadership qualities?

7. Does the applicant work well in groups?
Part III – RECOMMENDATION: TEACHER – SCIENCE OR MATH (continued)

8. Has the applicant had any problems with self-discipline and/or substance abuse which might interfere with his/her ability to participate effectively in the MAPS program?

9. Has the applicant discussed his/her career goals with you? If so, please describe.

10. To your knowledge, what are the applicant's strongest subjects in school?

11. To your knowledge, what are the applicant's weakest subjects in school?

12. In your opinion, would the applicant effectively meet the demands of a rigorous summer academic institute which includes courses in an agriculture, business, or engineering curriculum?

13. We would appreciate any additional comments concerning the applicant’s capacity for future college work and his/her potential for becoming a responsible and successful college student in agriculture, business, or engineering.

__________ Strongly recommend this student for participation
__________ Recommend this student for participation
__________ Recommend this student with reservations
__________ Do not recommend this student

__________________________________________
Signature

__________________________________________
Position/Class Taught

__________________________________________
Date

If you have any questions, please contact Brandon L. Clark at 785-532-6436 or bclark@ksu.edu. Thank you for taking the time to fill out this recommendation!
Part III – RECOMMENDATION: TEACHER – OTHER

The MAPS Program at Kansas State University is a 6-week summer bridge program that offers summer academic preparation for freshmen entering an agriculture, business, or engineering curriculum. African American, Asian American, Latino, and Native American students who will enroll at K-State in Fall 2015 may be selected to participate in the program after their high school graduation. Admission to the program is highly competitive. MAPS looks for students who genuinely possess the potential to prepare for and succeed in a college education in agriculture, business, or engineering. Your accurate and candid appraisal of the applicant will be closely examined during the student selection process. Additional pages may be attached.

Applicant Name: ________________________________________________________________

Recommender Name: ___________________________________________________________

1. How long and under what circumstances have you known the applicant?

2. Please check and give examples of the applicant's attitude towards school and education?
   - Above average
   - Average
   - Below average

3. Please check and give examples of the applicant's intellectual ability?
   - Above average
   - Average
   - Below average

4. Please check and give examples of the applicant's ability to communicate?
   - Above average
   - Average
   - Below average

5. Please check and give examples of the applicant's writing ability?
   - Above average
   - Average
   - Below average

6. Does the applicant exhibit classroom leadership qualities?

7. Does the applicant work well in groups?
Part III – RECOMMENDATION: TEACHER – OTHER (continued)

8. Has the applicant had any problems with self-discipline and/or substance abuse which might interfere with his/her ability to participate effectively in the MAPS program?

9. Has the applicant discussed his/her career goals with you? If so, please describe.

10. To your knowledge, what are the applicant's strongest subjects in school?

11. To your knowledge, what are the applicant's weakest subjects in school?

12. In your opinion, would the applicant effectively meet the demands of a rigorous summer academic institute which includes courses in an agriculture, business, or engineering curriculum?

13. We would appreciate any additional comments concerning the applicant’s capacity for future college work and his/her potential for becoming a responsible and successful college student in agriculture, business, or engineering.

[Signature]  _____ Strongly recommend this student for participation
            _____ Recommend this student for participation
            _____ Recommend this student with reservations
            _____ Do not recommend this student

Position/Class taught
Date

If you have any questions, please contact Brandon L. Clark at 785-532-6436 or bclark@ksu.edu. Thank you for taking the time to fill out this recommendation!
Part III – RECOMMENDATION: COMMUNITY OFFICIAL

The MAPS Program at Kansas State University is a 6-week summer bridge program that offers summer academic preparation for freshmen entering an agriculture, business, or engineering curriculum. African American, Asian American, Latino, and Native American students who will enroll at K-State in Fall 2015 may be selected to participate in the program after their high school graduation. Admission to the program is highly competitive. MAPS looks for students who genuinely possess the potential to prepare for and succeed in a college education in agriculture, business, or engineering. Your accurate and candid appraisal of the applicant will be closely examined during the student selection process. Additional pages may be attached.

Applicant Name: ________________________________________________
LAST FIRST MIDDLE

Recommender Name: ____________________________________________
LAST FIRST

1. How long and under what circumstances have you known the applicant?

2. Please check and give examples of the applicant's attitude towards school and education?
   o Above average
   o Average
   o Below average
   o Not applicable

3. Please check and give examples of the applicant's intellectual ability?
   o Above average
   o Average
   o Below average
   o Not applicable

4. Please check and give examples of the applicant's ability to communicate?
   o Above average
   o Average
   o Below average
   o Not applicable

5. Please check and give examples of the applicant's academic ability?
   o Above average
   o Average
   o Below average
   o Not applicable

6. Please describe the applicant’s leadership qualities?
Part III – RECOMMENDATION: COMMUNITY OFFICIAL (continued)

7. Has the applicant had any problems with self-discipline and/or substance abuse which might interfere with his/her ability to participate effectively in the MAPS program?

8. Has the applicant discussed his/her career goals with you? If so, please describe.

9. In your opinion, would the applicant effectively meet the demands of a rigorous summer academic institute which includes courses in an agriculture, business, or engineering curriculum?

10. We would appreciate any additional comments concerning the applicant’s capacity for future college work and his/her potential for becoming a responsible and successful college student in agriculture, business or engineering.

______ Strongly recommend this student for participation
______ Recommend this student for participation
______ Recommend this student with reservations
______ Do not recommend this student

________________________________________
Signature

________________________________________
Position

________________________________________
Date

If you have any questions, please contact Brandon L. Clark at 785-532-6436 or bclark@ksu.edu. Thank you for taking the time to fill out this recommendation!
Part IV – STUDENT ESSAYS
(Must be completed independently by the student)

Please write three personal essays telling us more about you. The essays are a critical part of your application. Essays should be neatly typed in black ink. **Please include your name on each essay.**

**Essay #1**

Write an essay describing yourself. Include activities you are involved in outside of school (work, church, community, hobbies, responsibilities at home) and describe your values.

**Essay #2**

Write an essay about what you plan to get involved in at K-State. What are your goals for yourself while you’re at college?

**Essay #3**

Write an essay explaining why you would like to participate in the MAPS program. Include your academic goals, future plans, and aspirations.
Part V - ACADEMIC RECORDS

Your MAPS application is not complete without submitting your most recent high school transcript. This is in addition to the transcript you may have submitted with your general application to K-State. Please submit the following along with your other application materials (check what is included):

_____ Transcripts

_____ ACT/SAT Scores

Once accepted into the MAPS program, MAPS students are required to fill out the Free Application for Federal Student Aid (FAFSA) for the 2015-2016 and 2016-2017 school years. More information about the FAFSA will follow.

I certify that all information in this application packet has been submitted truthfully and voluntarily.

_______________________________
Student's Name (Please print)

________________________________________
Student Signature Date

________________________________________
Parent/Guardian Signature Date

Confidentiality Statement

Kansas State University maintains various student records to document academic progress as well as to record interactions with University officials and staff. To protect the students' rights to privacy, and to conform with federal law (FERPA), the University has established a Student Records Policy. Interpretation of this policy is based on experience with educational records, and the policy itself may subsequently be modified in light of this experience. Notice of this policy and of students' rights under FERPA is given annually. Copies of this policy are available at the Registrar's Office, 118 Anderson Hall, and it is published in the Undergraduate and Graduate Catalog and in the Course Schedules at www.ksu.edu.

It is our goal to maintain the confidentiality of any and all information submitted on a MAPS application. If you have questions or concerns, please contact Brandon L. Clark at 785-532-6436 or bclark@ksu.edu.