



**Deadline for RECEIPT of all  
Application Materials:  
April 18<sup>th</sup>, 2016**



## APPLICATION

### CIBER Scholars

Duration: Summer 2016

(Monday, June 6<sup>th</sup> – Friday, July 29<sup>th</sup>, 2016)

#### Personal Information

First Name	
Last Name	
Permanent Street Address	
Permanent City, State, ZIP Code	
Permanent Phone	
<b>Present</b> Street Address	
<b>Present</b> City ST ZIP Code	
Present Phone	
E-Mail Address	
Birth Date (mm/dd/yy)	
<b>College or University currently attending</b> (Name, City, State)	
Major	
Cumulative GPA	
Expected Graduation Year	
Area of Scientific Interest	
You research mentor's name (if you have)	
Research mentor's contact info (Department email and phone no)	
Your DSU ID #	
Disability? (If yes, please state disability)	
<sup>1</sup> First Generation College? (Yes/No)	
Veteran Status (Yes/No)	
<sup>2</sup> Low Income Status (Yes/No)	

1. Check yes if your parents have not attended a post-secondary institution of higher education

2. The term "low-income individual" means an individual whose family's taxable income for the preceding year did not exceed 150 percent of the poverty level amount. For a family of 4 this amount would be \$35,775

Have you participated in this program before? (please check one):

- Yes
- No

Academic Level (please check one):

- Freshman
- Sophomore
- Junior
- Senior
- Other \_\_\_\_\_

Academic major / Primary Area of Interest:

Academic Major \_\_\_\_\_

Primary Area of Interest

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

Sex:

- Male
- Female

Are you either a US Citizen or Permanent Resident?

- Yes
- No

Ethnic / Racial Status:

- American Indian / Alaskan American
- Black / African American (Not Hispanic)
- Cambodian, Hmong, Laotian, or Vietnamese (Admitted to US after 12/3/1975)
- Other Asian / Pacific Islander
- Mexican American / Chicano/a
- Puerto Rican
- Other Hispanic
- White (non-Hispanic)
- Other: \_\_\_\_\_

### Statement of Interest

Explain, in 1 attached page, why you are interested in participating in the CIBER Scholars Program. Be sure to mention your areas of scientific interest and aspects of your background that you believe will ensure your success as a CIBER Scholar participant.

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as DSU CIBER Scholar participant, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

### Rules and Restrictions

- This program is open to individuals who are residents of Delaware during the term they are applying for.
- Housing and travel to and from the program are the responsibility of the intern. The program does not cover travel, room, and board.
- It is beneficial for the applicant to contact a mentor in their field prior to applying.

Name (printed)	
Signature	
Date	

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**A FULL application contains 1) Completed application form, 2) a brief (less than a page) narrative describing why you are interested in joining this program, and 3) your résumé. All materials must reach Dr. Melmaiee by **April 18<sup>th</sup>, 2016 (We encourage you to apply as soon as possible).****

**Send application pdf email with subject title:  
'CIBER SCHOLAR' to ([trjohnson@desu.edu](mailto:trjohnson@desu.edu)), or  
drop off/mail/fax application to:**

**Ms. Tiffini Johnson  
CIBER Office, Ag Annex Rm 221  
Dept. of Agriculture and Natural Resources  
Delaware State University  
1200 N DuPont Hwy.  
Dover, DE 19901  
Phone: (302)857-6862  
Fax: (302) 857-6402**