

University of California, Santa Barbara-Graduate Division 2021 UC LEADS PROGRAM APPLICATION

Part I. PROGRAM APPLICATION

Complete the program application provided in this packet.

Part II. STATEMENT OF INTEREST

Write a concise essay concerning your interest in UC LEADS at UCSB and graduate education in general. This essay should address (but is not limited to) the key components listed below. Please feel free to expand upon these components and share any additional information that you feel is relevant to your unique personal or educational history.

- Describe your research area of interest and, if applicable, prior and current research experience
- Discuss why you are interested in participating in an undergraduate research program and what you feel you can gain from the experience
- Discuss why you are interested in pursuing a graduate degree and your career objectives
- Describe your educational background and achievements, providing information on barriers (educational, social, and/or cultural) you may have personally faced and how you overcame them

Your statement should not exceed 1,000 typed words (single-spaced, 12 point font). Please type your statement of interest and attach it as a separate document.

Part III. RESUME

Include a 1-page resume with your application. Be sure to include any work or laboratory experience that you feel is relevant to your application

Part IV. UNOFFICIAL TRANSCRIPTS

Include a copy of your unofficial transcripts with your application. If you were a transfer student, please also include a copy of your unofficial transcripts displaying previous coursework from the community college.

Part V. LETTER OF RECOMMENDATION

One letter of recommendation is required from a faculty advisor, course instructor, TA or employer (one who is familiar with your scientific skills). Provide the recommendation form (Page 5-6) to your recommender and have him/her complete the form. The recommendation must be received by the application deadline and sent directly to UC LEADS program coordinator, Briana Muñoz-Flores, via email at bmunozflores@ucsb.edu.

Your completed application must be received by March 19, 2021.

Please email your completed application to:

Briana Muñoz-Flores
Assistant Director of Outreach, Graduate Division
bmunozflores@ucsb.edu



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Part I. PROGRAM APPLICATION: Personal Information Last Name First Name Middle **Local Street Address** City State Zip Code **UCSB** Email Address Personal Email Address (option) **Phone Number** LinkedIn Account Information Date of Birth Gender: _ Resident Status*: U.S. Citizen: ☐ Yes ☐ No If no, are you a Permanent Resident? : \square Yes \square No *AB540 students are eligible to apply Ethnicity: Select all that apply (Information is collected for statistical purposes): ☐ American Indian/Alaska Native ☐ East Indian/Pakistani ☐ African American/Black □ Japanese/Japanese-American ☐ Mexican/Mexican-American/Chican@ ☐ Korean/Korean-American ☐ Vietnamese-Vietnamese-American ☐ Other Hispanic/Latino (includes Cuban, Puerto Rican, Central and South American) ☐ Other Asian (not including Middle ☐ Filipino/Filipino-American Eastern) ☐ Pacific Islander (includes Micronesian, □ White/Caucasian Polynesian, other Pacific Islanders) ☐ Other (please provide explanation): ☐ Chinese/Chinese-American ☐ Decline to State



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Parent's Ec	ducation (Information is collected for statistic	cal purposes):			
Highest ed	ucation level of Parent 1:	Highest education level of Parent 2:			
· ·	Did not graduate high school	☐ Did not graduate high school			
	High school graduate	☐ High school graduate			
	Some college, but no bachelor's degree	Some college, but no bachelor's degree			
	4 year graduate	☐ 4 year graduate			
	Master's degree	☐ Master's degree			
	Professional degree	□ Professional degree			
	Doctoral degree	☐ Doctoral degree			
	Unknown	☐ Unknown			
	Decline to State	☐ Decline to State			
Current	Education				
UCSB Majo	or: Ex	spected Date of Graduation:			
UCSB Perm	n ID#: UCSB Current GPA:	Number of UCSB Units Completed:			
Are you a transfer student from a community college? \square Yes \square No					
If yes, plea	se complete the following:				
Na	me of Community College:				
Cu	mulative GPA: Date Trar	nsferred:			



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Educational Information

In a few words, state your educational/career goals:				
Do you plan to apply to a graduate program?	es 🗆 No			
If yes, when do you anticipate on applying to graduate so	chool?			
Which graduate degree are you considering? ☐ Master's☐ PhD☐ Other:				
What is your proposed field of graduate study?				
What are your top three choices for universities for gradua	ate school?			
1				
2				
3				
If you have <u>participated</u> in any of the following programs,	please select them from the list below.			
☐ Advancement via Individual Determination (AVID)				
☐ California Alliance for Minority Participation (CAMP)				
☐ Educational Opportunity Program (EOP)				
☐ Mathematics, Engineering, and Science Achievement (MESA)				
☐ Other:	_			
How did you learn about UC LEADS Program?				
☐ Faculty Advisor/Mentor	☐ Email Communication			
☐ Peer(s)	$\ \square$ Social Media (Web, Instagram, or			
☐ Program Director	Facebook)			
☐ Academic Advisor	☐ Other (please provide explanation):			
☐ Career Services				



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Research Information			
Have you participated in undergraduate research?	□ Yes □ No		
lf you have participated in undergraduate research, p may list up to 2 research experiences. Please note tha			
1. Program Name:	Dates:		
Institution/Company:	Faculty/Supervisor:		
2. Program Name:	Dates:		
Institution/Company:	Faculty/Supervisor:		
Are you currently in a research lab? ☐ Yes ☐ No			
Research Information (Continued)			
If you are currently in a research lab, please provide y	our faculty advisor's name and e-mail:		
Faculty Advisor:	Department:		
Should you be selected into UC LEADS is it your preferatives and their related lab/group? $\ \square$ Yes $\ \square$ No	ence to continue with your current faculty		
Faculty Preferences			
Please list two faculty members with whom you wish to program, it is the responsibility of the Scholar to identitabout UCSB faculty members can be found at their re (http://www.graddiv.ucsb.edu/departments).	ty and secure a faculty mentor. Information		
1. Faculty: D	Department:		

2. Faculty: _____ Department: _____



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To the Applicant:

Your application requires one letter of recommendation from a faculty member who knows you well enough to speak about your qualifications. Complete the following information and ask your O

recommender to complete the questionnaire at the end of this form and write a letter in support of your application. Please instruct your recommender to return both the letter and this form <u>via email</u> to UC LEADS program coordinator, Briana Muñoz-Flores , at <u>bmunozflores@ucsb.edu</u> .					
Name of Applicant:					
Last Name	First	Middle 			
Email	Majo	or			
To Recommenders: The goal of the UC LEADS is to prepare and encourage talented scholars from diverse backgrounds to compete for doctoral programs at UCSB and at other University of California campuses. Our research programs are intended to acquaint participants with UCSB faculty and graduate programs, and to familiarize scholars with the nature of graduate work by providing them with experience in an academic research environment. Your response to the questions below and your letter of recommendation will help us assess the applicant's maturity, level of preparation, and potential to benefit from UC LEADS. More information can be found at: http://ucleads.org/ . Please mark the appropriate response below and provide additional comments about the applicant in your written recommendation.					
Information Provided by Recommender:					
1. I have known the applicant as: □ a student □ a research assistant □ other:					
2. I have known the applicant for □ years □ months					
3. Applicant's achievement reflects his/her ability: □ extremely well □ very well □ not well					
4. Applicant's ability to set realistic & attainable goals: □ excellent □ good □ fair □ poor					
5. Applicant's commitment to his or her education is: □ excellent □ good □ fair □ poor					
6. I know the applicant: □ extremely well □ moderately well □ not well					
7. I recommend this applicant: \square moderately \square enthusiastically \square very enthusiastically					



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Faculty Recommendation

Please provide a written recommendation of this candidate according to your knowledge of her/his work and, if possible, a detailed assessment of the applicant's research in his/her field thus far. Additional comments about character, integrity or motivation are used to evaluate the applicant's potential for success and compatibility with the goals of the UC LEADS research program. You may use the space below or attach a letter. Thank you.

Name (print):	Title:
Department:	Email:

Please submit your recommendation letter on or before March 19, 2021 to:

Briana Muñoz-Flores
Assistant Director of Outreach, Graduate Division bmunozflores@ucsb.edu