

# UC LEADS 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 Michele Johnson, via email at [michelejohnson@ucsb.edu](mailto:michelejohnson@ucsb.edu).

***Your completed application must be received by **MARCH 11, 2022.*****

***Please email your completed application to:***

Michele Johnson  
Assistant Director of Diversity/UC LEADS Statewide Director, Graduate Division  
[michelejohnson@ucsb.edu](mailto:michelejohnson@ucsb.edu)

## 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)		
_____ LinkedIn Account Information	_____ Phone Number	_____ Date of Birth	

Gender: \_\_\_\_\_

Resident Status\*: U.S. Citizen: ☐ Yes ☐ No  
If no, are you a Permanent Resident? : ☐ Yes ☐ No  
*\*AB540 students are eligible to apply*

Ethnicity: Select all that apply (Information is collected for statistical purposes):

- |   |   |
|---|---|
| <input type="checkbox"/> American Indian/Alaska Native  | <input type="checkbox"/> East Indian/Pakistani                        |
| <input type="checkbox"/> African American/Black   | <input type="checkbox"/> Japanese/Japanese-American                   |
| <input type="checkbox"/> Mexican/Mexican-American/Chican@   | <input type="checkbox"/> Korean/Korean-American                       |
| <input type="checkbox"/> Other Hispanic/Latino (includes Cuban, Puerto Rican, Central and South American) | <input type="checkbox"/> Vietnamese/Vietnamese-American               |
| <input type="checkbox"/> Filipino/Filipino-American   | <input type="checkbox"/> Other Asian (not including Middle Eastern)   |
| <input type="checkbox"/> Pacific Islander (includes Micronesian, Polynesian, other Pacific Islanders)     | <input type="checkbox"/> White/Caucasian                              |
| <input type="checkbox"/> Chinese/Chinese-American   | <input type="checkbox"/> Other (please provide explanation):<br>_____ |
|   | <input type="checkbox"/> Decline to State                             |

Parent's Education (Information is collected for statistical purposes):

Highest education level of Parent 1:

- ☐ Did not graduate high school
- ☐ High school graduate
- ☐ Some college, but no bachelor's degree
- ☐ 4 year graduate
- ☐ Master's degree
- ☐ Professional degree
- ☐ Doctoral degree
- ☐ Unknown
- ☐ Decline to State

Highest education level of Parent 2:

- ☐ Did not graduate high school
- ☐ High school graduate
- ☐ Some college, but no bachelor's degree
- ☐ 4 year graduate
- ☐ Master's degree
- ☐ Professional degree
- ☐ Doctoral degree
- ☐ Unknown
- ☐ Decline to State

What language(s) did you grow up speaking in your home? \_\_\_\_\_

Please select all that apply. I am one or more of the following:

- ☐ a recipient of or eligible for the Extended Opportunity Programs and Services (EOPS) program (or equivalent)
- ☐ a recipient of or eligible for Cal FREST/SNAP
- ☐ a recipient of or eligible for Medi-Cal/Medicaid
- ☐ a recipient of or eligible for Pell Grant
- ☐ a recipient of or eligible for CalGrant
- ☐ a recipient of or eligible for CA Dream Act
- ☐ a current/former foster youth
- ☐ residing in public housing
- ☐ Decline to State / Unknown

## Current Education

UCSB Major: \_\_\_\_\_ Expected Date of Graduation: \_\_\_\_\_

UCSB Perm ID#: \_\_\_\_\_ UCSB Current GPA: \_\_\_\_\_ Number of UCSB Units Completed: \_\_\_\_\_

Are you a transfer student from a community college? ☐ Yes ☐ No

If yes, please complete the following:

Name of Community College: \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_ Date Transferred: \_\_\_\_\_

## Educational Information

In a few words, state your educational/career goals:

Do you plan to apply to a graduate program? ☐ Yes ☐ No

If yes, when do you anticipate on applying to graduate school? \_\_\_\_\_

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 graduate school?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

If you have participated 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?

- |   |   |
|---|---|
| <input type="checkbox"/> Faculty Advisor/Mentor | <input type="checkbox"/> Email Communication                        |
| <input type="checkbox"/> Peer(s)                | <input type="checkbox"/> Social Media (Web, Instagram, or Facebook) |
| <input type="checkbox"/> Program Director       | <input type="checkbox"/> Other (please provide explanation): _____  |
| <input type="checkbox"/> Academic Advisor       |   |
| <input type="checkbox"/> Career Services        |   |

## Research Information

Have you participated in undergraduate research? ☐ Yes ☐ No

If you have participated in undergraduate research, please provide the following information. You may list up to 2 research experiences. Please note that prior research experience is not required.

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

If you are currently in a research lab, please provide your faculty advisor's name and e-mail:

Faculty Advisor: \_\_\_\_\_ Department: \_\_\_\_\_

Should you be selected into UC LEADS is it your preference to continue with your current faculty advisor and their related lab/group? ☐ Yes ☐ No

## Faculty Preferences

Please list two faculty members with whom you wish to conduct research. If accepted in to the program, it is the responsibility of the Scholar to identify and secure a faculty mentor. Information about UCSB faculty members can be found at their respective department websites (<http://www.graddiv.ucsb.edu/departments>).

1. Faculty: \_\_\_\_\_ Department: \_\_\_\_\_

2. Faculty: \_\_\_\_\_ Department: \_\_\_\_\_

**University of California, Santa Barbara-Graduate Division**

## 2022 UC LEADS PROGRAM APPLICATION

**To 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 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 **via email to Michele Johnson** at [michelejohnson@ucsb.edu](mailto:michelejohnson@ucsb.edu)

**Name of Applicant:** \_\_\_\_\_  
Last Name First Middle

Email	Major

**To Recommender:**

The goal of 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 UC 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: ☐ moderately ☐ enthusiastically ☐ very enthusiastically

## 2022 UC LEADS PROGRAM APPLICATION

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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 11, 2022** to:***

Michele Johnson

Assistant Director of Diversity, UC LEADS Statewide Director, Graduate Division

[michelejohnsn@ucsb.edu](mailto:michelejohnsn@ucsb.edu)