

**APPLICATION INSTRUCTIONS FOR
TEXAS A&M HEALTH SCIENCE CENTER BAYLOR COLLEGE OF DENTISTRY' S
2012 SUMMER PRE-DENTAL ENRICHMENT PROGRAM
for Rising 10th GRADERS
(SPEP 10)
(Current 9th Graders)**

**2012 SUMMER PRE-DENTAL ENRICHMENT PROGRAM
for RISING 11th GRADERS
(SPEP 11)
(Current 10th Graders)**

**Program Dates: June 4 – 8, 2012
8:00 a.m. – 12:00 p.m.**

Orientation for SPEP 10 and SPEP 11: June 4, 2012

1. Complete all application items. Take particular care to complete all items concerned with course grades. IF ALL ITEMS ARE NOT PROPERLY COMPLETED, YOUR APPLICATION CANNOT BE CONSIDERED.
2. All applications, including supporting documents, **MUST be POSTMARKED by April 27, 2012.**
3. Please make necessary arrangements to have all application documents (transcript, letter of evaluation, etc.) bear ONE LAST NAME.
4. One evaluation form must be completed by a teacher. The teacher must know you personally and be qualified to evaluate you personally and academically. NO ADDITIONAL EVALUATIONS ARE NECESSARY. (Ask the teacher who completes your evaluation form to place it in an envelope, seal the envelope, sign across the seal, and return the form to you to submit with your application.)
5. All application materials must be mailed to:
2012 SPEP 10 AND SPEP 11
Texas A&M Health Science Center Baylor College of Dentistry
Office of Student Development
Attn: Ms. Willie Alexander
PO Box 660677
Dallas, TX 75266-0677

Please include in one large envelope:

- Application form (**Do NOT staple!**)
 - Personal statement (*Limit to one page*)
 - Evaluation form in sealed envelope
 - Statistical Questionnaire and photograph
 - Official high school transcript
6. Please notify Ms. Alexander promptly of any CHANGE OF ADDRESS.
 7. Direct all communication concerning the STATE OF COMPLETION of your application to:

Ms. Willie Alexander
Phone: 214.828.8996
Fax: 214.874.4502
Email: walexander@bcd.tamhsc.edu

The Summer Pre-Dental Enrichment Programs for 10 th and 11 th Graders are sponsored by the Health Resources and Services Administration and the Texas A&M Health Science Center Baylor College of Dentistry.
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Incomplete applications and missing information can delay the processing of your application.

2012 SUMMER PRE-DENTAL ENRICHMENT PROGRAMS
Texas A&M Health Science Center Baylor College of Dentistry

Please indicate the Summer Enrichment Program to which you are applying:

- Summer Pre-Dental Enrichment Program for Rising 10th Graders (Current 9th Graders)**
Program Dates: June 4-8, 2012
- Summer Pre-Dental Enrichment Program for Rising 11th Graders (Current 10th Graders)**
Program Dates: June 4-8, 2012

PLEASE TYPE OR PRINT YOUR INFORMATION IN BLACK INK.

1. Name: _____
Last First Middle Initial
2. Preferred Name: _____ 3. Social Security No: _____
4. Other name(s) under which academic work was pursued: _____
5. Date of Birth: _____ 6. Sex: Male Female
Month Date Year
7. Permanent Address: _____
No. and Street Apt. No. City State Zip
8. Home Phone No: _____ Work Phone No: _____
Cell Phone No: _____ Email: _____
9. Citizenship: _____ (Country) If not a U.S. citizen, type of Visa: _____
10. Place of Birth: _____
City State County

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11. Name and address of: father legal guardian 12. Father: living deceased
Occupation: _____
Name _____
Home Phone No: _____
No. and Street Apt. No. _____
Business Phone No: _____
City State Zip _____
13. Name and address of: mother legal guardian 14. Mother: living deceased
Occupation: _____
Name _____
Home Phone No: _____
No. and Street Apt. No. _____
Business Phone No: _____
City State Zip _____

PERSONAL STATEMENT:

1. Explain, in your own words, your career and academic goals and your reasons for wanting to participate in this Program. Please indicate how your interest in dentistry/health careers developed and how this Program will benefit your pursuit of a career. Include any unusual circumstances that have impacted you personally or obstacles you have overcome while pursuing an education. Please be sure to **TYPE** statement on a separate, attached sheet of paper and keep length to approximately 250 words (one full page). **Handwritten essays are not acceptable.**
2. List any work or volunteer experiences.

3. List any academic honors, awards, or other recognitions you have received while in middle school or high school.

4. List and describe extracurricular or community activities, special interests and hobbies, etc. Indicate how you spend your leisure time.

5. List leadership positions you have held in societies, organizations, etc.

6. List names of other summer programs you are applying to or plan to participate in this summer (including band camp, cheerleading camp, etc.).

KNOWLEDGE OF PROGRAM:

1. How did you learn about this program? _____
2. Did you participate in TAMHSC-BCD Dental Awareness Program while in elementary school? Yes No
3. Did you come on a field trip to TAMHSC-BCD while in high school? YES NO
4. Did you participate in the TAMHSC-BCD's SPEP 10 program? YES NO
5. Are you currently or was previously a member of TAMHSC-BCD's Future Dentist Club (FDC)? Yes No
6. Have you participated in other summer or academic programs to help you prepare for college (University Outreach, Upward Bound, Gear-Up, etc.)? YES NO If yes, please list all other programs, activities and the years attended.

Applicant's Name _____
(Please print)

Please check the box to the right that most accurately corresponds to your evaluation of the characteristics this applicant demonstrates/possesses. "7" is the highest rating and "1" is the lowest rating. Indicate "0" if unknown.

	7	6	5	4	3	2	1	0
Reliability – Accuracy, thoroughness, integrity, promptness, conscientiousness...								
Motivation – Professional promise, interest, and enthusiasm ...								
Emotional Stability – Self-control, poise, behavior in class, judgment under difficult circumstances...								
Social Values – Sensitivity to needs of others...								
Intellectual Curiosity – Interest in learning, inquisitiveness...								
Industry – Drive, initiative, work habits, performance...								
Personality – Manners, courtesy, tact, enthusiasm, friendliness...								
Leadership – Ability to inspire confidence, self-confidence, decisiveness, deliberation...								
Cooperativeness – Respect for authority, ability to work with others...								

E. Summary Opinion

Please check the category in which you would place this applicant regarding his/her overall suitability as an applicant.

- 7 An excellent applicant
- 6 Well above average
- 5 Above average
- 4 Average
- 3 Slightly below average
- 2 Below average
- 1 Very poor (Not recommended)
- 0 Unknown

EVALUATION COMPLETED BY:

Name: _____

Title/Position: _____

Address: _____

City Street No. _____ Street Name _____ Apt. # _____ Zip Code _____

Phone: _____ Email: _____

Evaluator's Signature: _____ Date: _____

Applicant's Name: _____
(Please print)

STATISTICAL QUESTIONNAIRE

PLEASE PRINT USING BLACK INK

Name (Full legal): _____
Last First Middle

Social Security Number:

Race or Ethnic Group:

Non-Hispanic/Latino

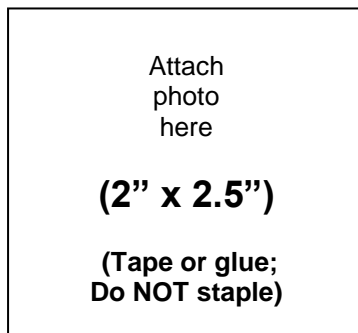
- American Indian Alaskan Native Black Native Hawaiian/Pacific Islander White
- Asian (specify national origin):
 Vietnamese Indian Pakistani Other _____
- More than once race: Specify _____
- Other (Please specify): _____

Hispanic/Latino

- Hispanic/Latino (specify national origin):
 Mexican Puerto Rican Cuban Other _____
- American Indian Alaskan Native Black Native Hawaiian/Pacific Islander White
- Asian (specify national origin): _____
 Vietnamese Indian Pakistani Other _____
- More than one race: Specify _____
- Other (Please specify): _____

NOTE: After completion of this Statistical Questionnaire form, please attach a recent photograph and combine it along with other application materials. This photo should be sized at 2" X 2.5", showing head and shoulders only.

Do not staple, you may use glue or tape.



Signature: **X** _____

Date: _____