

# Chicago Area Health and Medical Careers Program

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## APPLICATION FOR PRE-COLLEGE PROGRAMS PROGRAM COMPONENT (SOPHOMORES, JUNIORS AND SENIORS)

### BACKGROUND

1. Name \_\_\_\_\_  
Last First Initial

2. Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
City State Zip

3. Telephone Number (\_\_\_\_) \_\_\_\_\_

4. Social Security Number \_\_\_\_\_

5. Sex: ( ) Male ( ) Female

6. Birth Date \_\_\_\_\_ Age \_\_\_\_\_

7. Ethnic Background: ( ) *Black* ( ) *Oriental*

( ) *Hispanic [Mexican-American/Puerto Rican]* ( ) *White* ( ) *Other, Specify: \_\_\_\_\_*

8. Name of Parent/Guardian \_\_\_\_\_  
Last First Initial

9. Address of Parent/Guardian \_\_\_\_\_  
(If different from above)

10. Name of High School you currently attend \_\_\_\_\_

11. What grade do you expect to complete this June? \_\_\_\_\_

12. Do you plan to attend college? ( ) Yes ( ) No

13. If you attend college, what field(s) are you considering as an academic major(s)?  
\_\_\_\_\_

14. Have you ever been a participant in the Young Scientist Program? ( ) No  
( ) Yes give dates: \_\_\_\_\_

### HIGH SCHOOL COURSES

Check all science and math courses you have taken and list the final grades received. For those science and math courses you are currently taking, check them off and write "In Progress".

Course	Grade	Course	Grade
Pre-Algebra	_____	Calculus	_____
Algebra	_____	General Science	_____
Plane Geometry	_____	Biology	_____
Algebra II, Trigonometry	_____	Chemistry	_____
College Algebra	_____	Physics	_____
Pre-Calculus	_____	Fundamentals in Science	_____

**(Note: Computer Science or Computer Programming classes are not considered math courses)**

GRADE POINT AVERAGE (GPA) \_\_\_\_\_ [IF THIS IS BASED ON A SCALE OTHER THAN 4.0 PLEASE NOTE]

Test Scores

PSAT:	_____ Verbal	_____ Math			
PLAN:	_____ English	_____ Math	_____ Social Science	_____ Natural Science	_____ Composite
PACT:	_____ English	_____ Math	_____ Social Science	_____ Natural Science	_____ Composite
ACT:	_____ English	_____ Math	_____ Social Science	_____ Natural Science	_____ Composite
SAT:	_____ Verbal	_____ Math	_____ Verbal	_____ Math	

CLASS RANK: \_\_\_\_\_ out of \_\_\_\_\_

When returning your application, please enclose official transcripts of all high school courses completed.

Students will be selected for the program based on qualifications, recommendations, and/or interviews. Although our decisions are not based on any isolated factor, each applicant must have satisfactorily completed one year of math and science for each year of high school attended. **Upon acceptance, students are required to pay a \$175.00 instructional fee.**

I have read this application and approve of the applicant's participation in this program. I assume full responsibility for his/her conduct.

\_\_\_\_\_  
Name of Parent/Guardian

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

For further information about the Chicago Area Health and Medical Careers Program, please call: **(312) 567-5912.**

**Mail applications to:**

**Pamela Cratic-Howard, Director of Pre-College Programs  
Chicago Area Health and Medical Careers Program  
IIT Center  
3424 South State Street, 4<sup>th</sup> Floor  
Chicago, IL 60616-3793**

