



STEM Academy Application



I am enrolling in the Week beginning _____, 20____
STUDENT INFORMATION

Name:

_____ Last Name First Name Middle Initial

Mailing Address: _____
Number and Street City State Zip Code

Home Phone Number: _____ Cell Phone: _____

E-Mail Address: _____

SSN : _____

Gender Male Female Do you currently qualify for free or reduced meals? Yes No

Race/Ethnic Category: White Black Hispanic Asian/Pacific Islander American Indian/Alaskan Native

Math Course _____ Current average _____ Grade for school year 2016-17: _____

Current GPA _____

In one paragraph (no more than 50 words), describe your career goals and how certain you are of these goals. If you are unsure of your career choice, describe things that are of interest to you. Please type and attach as a separate sheet.

References:

Two letters of recommendation are required. They must come from adults in your community and may include teachers, but not relatives .

Return 7 things: 1)this form 2) Health Statement form, 3) Liability Release form, 4) Camp Rules form, 5)your career goals, 6) two letters of reference, to:

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