

SI Bridges to the Baccalaureate Program

SIU Carbondale | John A. Logan College | Shawnee Community College

What is the SI Bridges to the Baccalaureate?

The Southern Illinois Bridges to the Baccalaureate Program (SI Bridges) is a National Institutes of Health (NIH) program that provides services and opportunities for underserved community college students to complete the associate degree and transfer to a four year institution to finish a baccalaureate degree. The emphasis is on *biomedical and behavioral science research* training, and *not* on pursuing a professional degree in health sciences such as a Medical or Dental Degree. Participation in this program is completely voluntary and a participant may withdraw at any time without any repercussions.

What are the benefits?

SI Bridges students will participate in a two year program that offers:

- Paid professional training through seminars, innovative courses, and group and individual research experiences.
- Strong multi-faceted mentoring, academic advising, tutoring and counseling.
- Professional development activities that include enhancement of communication and academic skills, success strategies, career planning, and exposure to BBS disciplines.

Are you eligible?

I am eligible to apply if I meet the following qualifications:

- ✓ I am a US citizen or permanent resident
- ✓ I have a career interest in biomedical or behavioral sciences
- ✓ I am a full-time student registered for at least 12 hours
- ✓ I am available to participate in program-sponsored activities
- ✓ I have a cumulative GPA of 3.0 for all high school work and 2.7 for any community college work completed
- ✓ I meet **at least one** of the following criteria:
 - I have a demonstrated financial need
 - I am a first generation college student
 - I have a documented disability
 - I am a member of an underrepresented minority group (African American, Hispanic/Latino, Native American/Alaska Native or Pacific Islander)

If selected, what is expected of me?

- Maintain a GPA of 2.7 or higher in a science, technology, engineering, math or behavioral science major.
- Complete an undergraduate degree program.
- Maintain regular contact with program staff.
- Conduct paid research full-time during one summer and complete at least one research project.
- Complete courses and workshops specific to the program

Year 1

- **Fa1**—apply to the program
- **Sp1**— Connecting Life Course and Professional Development Activities 4 hrs per week
Total Earned: \$600 (\$10 x 4 hrs/wk over 15 weeks)
- **Su1**-- Summer Research Institute 40 hrs per week
Total Earned: \$3200 (\$10 x 40 hrs/wk over 8 weeks)

Year 2

- **Fa2**—Professional Development Activities & Research
Total Earned: \$1950 (\$10 x13 hrs/wk 15 weeks)
- **Sp2**— Research 10 hrs per week
Total Earned: \$1500 (\$10 x 10 hrs/wk over 15 weeks)

What is the application process?

1. Submit completed application and required materials by the deadline.
2. Selection committee will review applicant information and make recommendations.
3. Interviews will be conducted with qualified applicants.
4. Applicants will be notified within 2 weeks of interviews.

Contact Information:

| | |
|--|---|
| Donna Ford, M.S. John A. Logan College donna.ford@jalc.edu | John A. Logan College 700 Logan College Road Carterville, IL 62918 618.985.8463 |
| Karen Renzaglia, Ph.D SIU Carbondale renzaglia@siu.edu | Southern Illinois University Plant Biology-SIUC MC: 6509 Carbondale, IL 62901 618.453.3229 |
| Lori Armstrong, M.S. Shawnee Community College loria@shawneecc.edu | Shawnee Community College 8364 Shawnee College Road Ullin, IL 62992 618-634-3313 |



Please **TYPE** or **PRINT** the following information, then **PRINT** and **SIGN** the application.

| Part I Student Data | | | | |
|--|---|---|---|--|
| Legal Name (Last) | | (First) | (Middle) | Birthdate |
| Permanent Street Address | | City, State, | | Zip Code |
| Area Code and Telephone Number | | | E-mail Address | |
| Name of High School | | High School GPA | City, State, Zip | |
| SAT: Combined _____ Reading _____ Math _____ | ACT: Composite _____ English _____ Math _____ Reading _____ | | HS Algebra II Grade Earned (or List highest Math Class & grade) | Chemistry Grade Earned |
| Current Major at Comm. College | Year at Com College <input type="checkbox"/> 1 st <input type="checkbox"/> 2 nd <input type="checkbox"/> 3 rd | Do you intend to transfer to SIU ? (ex. Spring 2017) <input type="checkbox"/> Yes <input type="checkbox"/> No When? _____ | | |
| Intended Major at 4-yr Institution: | | If no, list name of other 4-year institution | | |
| Ethnicity: | | Citizenship: | | Gender: |
| <input type="checkbox"/> African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Alaskan Native <input type="checkbox"/> Native American <input type="checkbox"/> Asian American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Caucasian <input type="checkbox"/> Other _____ | | <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident# _____ <input type="checkbox"/> Other _____ | | <input type="checkbox"/> Female <input type="checkbox"/> Male |
| Awards: List awards, honors or special recognitions | | | | |
| | | | | |
| Extracurricular Activities: List school related activities, volunteer experiences and/or employment. Indicate leadership positions held (if any) | | | | |
| | | | | |

Eligibility

Yes No I am a first generation college student

Highest grade/degree completed by your mother/guardian?

12th Associates Bachelor's Masters PhD JD MD Other: _____

Highest grade/degree completed by your father/guardian?

12th Associates Bachelor's Masters PhD JD MD Other: _____

Yes No I have a documented disability.

If yes, please indicate: Hearing Visual Mobility Other: _____

Yes No I have a demonstrated financial need based on the 2015 HHS Federal Income guidelines

| Family size | Income | Family size | Income |
|-------------|----------|-------------|--------|
| 1 | \$11,770 | 5 | 28,410 |
| 2 | 15,930 | 6 | 32,570 |
| 3 | 20,090 | 7 | 36,730 |
| 4 | 24,250 | 8 | 40,890 |

For families/households with more than 8 persons, add \$4,160 for each additional person.

Yes No I am a member of an underrepresented minority group.

(African American, Hispanic/Latino, Native American/Alaska Native or Pacific Islander)

Part 2 Essay

Include a 2-3 page narrative describing the following:

- Your family background and any personal or academic challenges you have faced.
- Your academic preparation and interest in biomedical or behavioral science.
- Your academic aspirations and plans after community college.
- Your short and long term career goals.
- What you hope to gain from your participation in the Bridges program.

ALL APPLICANTS MUST COMPLETE THIS SECTION

This release form enables the Southern Illinois Bridges to the Baccalaureate Program at Southern Illinois University Carbondale, John A. Logan College, and Shawnee Community College to obtain copies of all academic and financial aid records, including transcripts, grade reports, financial aid eligibility, and other information pertaining to my possible enrollment in the Program. This information may be shared with other university personnel in accordance with federal regulations and university policy.

I understand that a copy of my application form will be kept on file at the Southern Illinois Bridges to the Baccalaureate Program office and that the resulting information received from counselors, admission and financial aid officers, instructors, etc. will be kept confidential in compliance with the Family Rights and Privacy Act.

I hereby certify to the best of my knowledge that all information submitted is complete and accurate. I understand that failure to disclose information, or falsification of information, are grounds for not being accepted to the Southern Illinois Bridges to the Baccalaureate Program and, if accepted into the program, grounds for immediate termination.

Date _____ Signature of Applicant _____

Date _____ Signature of Parent or Guardian _____
(To be signed by parent or guardian if applicant is under 18 years of age)

PLEASE RETURN THIS APPLICATION AND (2) RECOMMENDATION FORMS TO YOUR CAMPUS LIASON:

| | | | |
|---------------------------|--|---|--|
| JOHN A. LOGAN COLLEGE | Donna Ford, M.S. Life Science Instructor Room C240 | 700 Logan College Road Carterville, IL 62918 | 618.985.8463 donna.ford@jalc.edu |
| SHAWNEE COMMUNITY COLLEGE | Lori Armstrong, M.S. Life Science Instructor-Room H1052 | 8364 Shawnee College Road Ullin, IL 62992 | 618-634-3313 loria@shawneecc.edu |

| | | |
|---|---|---|
| Return to the appropriate campus liaison: | JOHN A. LOGAN COLLEGE | SHAWNEE COMMUNITY COLLEGE |
| | Donna Ford, M.S. Life Science Instructor Room C240 700 Logan College Road Carterville, IL 62918 618.985.8463 donna.ford@jalc.edu | Lori Armstrong, M.S. Life Science Instructor-Room H1052 8364 Shawnee College Road Ullin, IL 62992 618-634-3313 loria@shawneecc.edu |

This Part Completed by the Applicant

Please fill out your personal information and provide this form to an academic or professional reference.

| | | |
|-------------|--------------|-----------------|
| (Last Name) | (First Name) | (Current Major) |
|-------------|--------------|-----------------|

This part completed by the recommender

The person named above has applied to the SI Bridges to the Baccalaureate Program. This program represents a partnership between SIU Carbondale and John A. Logan College and Shawnee Community College. We are a comprehensive program funded by the National Institutes of Health (NIH) that provides personalized training for students to complete the associate and baccalaureate degrees in biomedical and behavioral sciences. We wish to select bright and motivated students who will benefit from our program. Thank you for taking the time to complete this form.

Please provide your honest appraisal of this student as to other students in your classes or are of study:

| | Excellent | Good | Average | Below Average | Unable to Evaluate |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Writing Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Oral communication skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to work in Cooperative Setting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Reliability/ Responsibility/ & Follow Through | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Organizational Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Leadership | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| |
|---|
| Please comment on the applicant's qualities that you feel are exceptional: |
| |

| |
|--|
| Please comment on the applicant's qualities that you feel need improvement: |
| |

In what capacity have you known this applicant? _____ How long? _____

| | | |
|----------------------|--------------------|------|
| Printed Name | Signature | Date |
| Institution | Title & Department | |
| Phone (XXX-XXX-XXXX) | Email | |

| | | |
|---|---|---|
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| Oral communication skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to work in Cooperative Setting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Reliability/ Responsibility/ & Follow Through | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Organizational Skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Leadership | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| |
|--|
| Please comment on the applicant's qualities that you feel are exceptional: |
| |
| Please comment on the applicant's qualities that you feel need improvement: |
| |

In what capacity have you known this applicant? _____ How long? _____

| | | |
|----------------------|--------------------|------|
| Printed Name | Signature | Date |
| Institution | Title & Department | |
| Phone (XXX-XXX-XXXX) | Email | |