



Women in Science Program Application
(Student must be entering their Senior year in Fall 2020)

Last Name _____ First Name _____

Date of Birth _____

Home Address _____

Home Phone # _____ Cell Phone # _____

Email _____

Parent/Guardian's Name _____

Parent's Phone # _____

Parent's email _____

Grade (Fall 2020) Freshman Sophomore Junior **Senior**

High School _____

GPA / Class rank (if known) _____

Please list Honors/ AP classes you have taken

Please state why you think that you should be chosen for this program

Name of Guidance Counselor _____

Guidance Counselor's Phone # _____

Submit Essay (500-word maximum)

Why are you interested in participating in the Maimonides Women in Science Summer Program?