



Academic Program for EXcellence

**Section I: Applicant's Information**

*Please Print or Type.*

1. Name: \_\_\_\_\_  
LAST FIRST MIDDLE
2. Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender:  Male  Female  
MM/DD/YYYY
3. Permanent Home Address: \_\_\_\_\_
4. Daytime Phone: (\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
NUMBER AND STREET CITY STATE ZIP CODE
5. E-mail Address: \_\_\_\_\_ Fax Number (if any): (\_\_\_\_) \_\_\_\_\_
6. Please indicate your racial/ethnic background:  
 Asian American/Pacific Islander     Latino/a     American Indian/Alaskan Native (tribal enrolled member)  
 African American     White     Other, Specify \_\_\_\_\_

**Section II: Parent/Guardian Information**

*Please provide information of a parent or guardian. Please Print or Type.*

7. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
LAST FIRST MIDDLE
8. Home Address: \_\_\_\_\_
9. Daytime Phone: (\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_  
NUMBER AND STREET CITY STATE ZIP CODE

**Section III: Applicant's Academic Information**

*Please Print or Type.*

10. Name of High School: \_\_\_\_\_
11. High School Address: \_\_\_\_\_
12. High School Phone: (\_\_\_\_) \_\_\_\_\_ Date of High School Graduation: \_\_\_\_\_  
NUMBER AND STREET CITY STATE ZIP CODE MM/DD/YYYY
13. Please list all extracurricular activities that you are involved in at high school, in your community, neighborhood, etc.  
*Attach separate sheet if needed.*

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14. Have you applied to Iowa State University?  Yes  No
15. Have you received Iowa State University's offer of admission?  Yes  No
16. What major(s)/minor(s) do you plan to pursue at Iowa State University: \_\_\_\_\_
17. Have you applied for financial aid by filling out the current Free Application for Federal Student Aid (FAFSA)?  Yes  No
18. Have you taken the ACT?  Yes  No If yes, please indicate score \_\_\_\_\_
19. Have you taken the SAT I?  Yes  No If yes, please indicate score \_\_\_\_\_

**Section IV: Personal Statement**

**Please answer the following question in essay form on a separate sheet in no more than 500 words. Please Type.**

20. Why did you choose to attend Iowa State University and participate in APEX?

**I certify that to the best of my knowledge, the information provided above is complete, true and verifiable. I understand falsifying or omitting information is sufficient cause for denial of my application or dismissal from APEX, Iowa State University.**

SIGNATURE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

**Please return completed application and supporting documents postmarked on or before April 15 to:**

ACADEMIC PROGRAM FOR EXCELLENCE (APEX)  
 OFFICE OF MULTICULTURAL STUDENT AFFAIRS, IOWA STATE UNIVERSITY  
 2224 STUDENT SERVICES BUILDING, SUITE 2080  
 AMES, IA 50011-2224



# Letter of Recommendation

Academic Program for EXcellence

## To the Applicant

This form is to be filled out in part by you and in part by a guidance counselor, teacher, principal, or community leader who knows you well. Please complete Sections I and II of this form and then give it to your recommender to complete Sections III and IV.

### Section I: Applicant's Information

Please Print or Type.

Name: \_\_\_\_\_  
LAST FIRST MIDDLE

Address: \_\_\_\_\_  
NUMBER AND STREET CITY STATE ZIP CODE

Daytime Phone: (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

### Section II: Applicant's Waiver of Right to Access

The Family Educational Rights and Privacy Act of 1974, as amended (P.L. 93-380), allows you to access this letter of recommendation if admitted and enrolled into the Academic Program for EXcellence (APEX), unless you have waived such access. Please check one of the statements and sign below.

- I do not waive my right of access to this letter of recommendation.
- I hereby waive my right of access to this letter of recommendation.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

## To the Recommender

The applicant named above is applying to the Academic Program for EXcellence (APEX) at Iowa State University. APEX is an eight-week summer program designed for incoming freshmen students of color. Please complete this reference form along with a separate recommendation letter written and signed on your official academic or business letterhead stationary. Comment on the applicant's character, personality, potential, leadership abilities, social skills, academic ability, drive and motivation for college.

### Section III: Recommender's Information

Please Print or Type.

Name: \_\_\_\_\_  
LAST FIRST MIDDLE

Title: \_\_\_\_\_ Institution: \_\_\_\_\_

Institution's Address: \_\_\_\_\_  
NUMBER AND STREET CITY STATE ZIP CODE

Work Phone: (\_\_\_\_) \_\_\_\_\_ Fax Number (if any): (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Relationship to the applicant: \_\_\_\_\_

### Section IV: Summary Evaluation

I would make the following recommendation for the applicant's admission to the APEX program:

- Enthusiastically recommend
- Strongly recommend
- Recommend
- Recommend with reservations

\_\_\_\_\_  
RECOMMENDER'S SIGNATURE

\_\_\_\_\_  
DATE

**Please return both signed documents in a sealed envelope postmarked on or before April 15 to:**

ACADEMIC PROGRAM FOR EXCELLENCE (APEX)  
 OFFICE OF MULTICULTURAL STUDENT AFFAIRS, IOWA STATE UNIVERSITY  
 2224 STUDENT SERVICES BUILDING, SUITE 2080  
 AMES, IA 50011-2224