Our Mission
To provide assistance, opportunities, and community for Native Hawaiian and Pacific Island students to excel in the fields of Science, Technology, Engineering, and Mathematics (STEM). Comprehensive support involving outreach, recruitment, retention, and placement strategies aim to increase the number of qualified individuals on a successful path to leadership in community, industry, and academia.

Student Eligibility
Preference will be given to students who meet the following requirements:
- Native Hawaiian, Polynesian, Native American, and Alaska Native students and students of an underrepresented population in the STEM fields
- Students pursuing a STEM degree (your department must offer a BS degree)
- Full-time undergraduate status (12 credits)
- Full- or part-time graduate status
- Home campus is University of Hawaii at Mānoa

To Apply for the NHSEMP Scholars Program:
All of the following documents must be turned in together to Kelli Ching at Holmes Hall 207C.
- NHSEMP Scholars Program Application: fully completed, signed, and dated as indicated (4 pages).
- Personal Statement: (one-page minimum, three-page maximum; 12-pt. font; hardcopy only)
  Please answer and explain the following questions:
  1. What have you done in the past 12 months that you are proud of – academically, professionally, & personally?
  2. What do you hope to accomplish in the next 12 months?
  3. What are some obstacles/challenges you expect to overcome in reaching your destination?
  4. What steps will you take to overcome these obstacles/challenges and how can NHSEMP help you to succeed?
  If you are a first-time NHSEMP applicant, please also describe who you are, your interests and goals, academic and financial situation, and your plans beyond this degree.
- Financial Aid Package & Cost of Attendance information: please see Section V for instructions.
- Current Resume
- List of References – minimum of 2 (please provide Name, Title/Position, Phone Number).
- Current WH-1 form – for Section A, please use your mailing address and include your SSN.
- Media Release Waiver
- Optional – Book Certification Form & Original Book Receipts (for undergraduate students only)

For more information, please contact:
Joshua Kaakua at 808-956-2289, jkaakua@hawaii.edu
Kelli Ching at 808-956-7945, chingkl@hawaii.edu
Daniel Lipe at 808-956-5009, lipe@hawaii.edu

Funding for NHSEMP is provided by:
U.S. Department of Education Native Hawaiian Education Program – Kaiāulu STEM;
National Science Foundation LSAMP – Islands of Opportunity Alliance;
National Science Foundation TCUP – Indigenous Knowledge in Engineering
I. Applicant Information:

Today’s Date: ____________________________

Name: ____________________________________
(As listed on your Driver’s License / Picture ID)

Name: __________________ Date of Birth: __________________
(Name you prefer to be called)

UH ID Number: __________________ UH Username: _______________________

How did you hear about NHSEMP? _______________________________________
(ex: friend-include name; organization/program, counselor-include name, etc)

Shirt Size: ____________________________

Email Address: ___________________________
(the email address you check)

Mailing Address: ___________________________
(Street, Apt. #, City, State, Zip Code)

Permanent Address: ___________________________
(Street, Apt. #, City, State, Zip Code)

Cell Phone: ____________________________ Other Phone: ____________________________

Do you give your permission to be contacted via text message? Yes _______ No ________

Ethnicity: please check all that apply

___ Chinese ___ Chamorro
___ Filipino ___ Hawaiian
___ Japanese ___ Micronesian
___ Korean ___ Samoan
___ Other Asian (____________________) ___ Other Pacific Islander (____________________)
___ African American ___ Alaskan Native
___ Caucasian ___ Native American
___ Hispanic
___ Other (____________________)
NHSEMP Fall 2012 Scholars Program Application

Deadline: August 31, 2012

II. Educational Background:

High School: ____________________________________________

College: ________________________________________________
(if you have recently transferred to UH Manoa)

Current Class Level: Freshman  Sophomore  Junior  Senior  Masters  Doctorate  Other: ________________
(please circle)

Major: ________________________________________________  Cumulative GPA  Previous Semester’s GPA

Expected Graduation Date: Fall  Spring  Year ____________
(please circle)

III. Faculty Advisor / Professional Mentor: (If you do not have a mentor yet, please leave it blank)

Faculty Advisor:
Name __________________________ Job Title __________________________ Phone/Email __________________________

Professional Mentor:
Name __________________________ Job Title __________________________ Phone/Email __________________________

IV. Extracurricular: (please use additional paper if necessary)

Are you involved in any clubs, societies, or national organizations?  Yes  No

If yes, which ones? ______________________________________

_____________________________________________________

_____________________________________________________

Are you currently working or interning?  Yes  No

If yes, where? ______________________________________

_____________________________________________________

FT  PT

_____________________________________________________

FT  PT

Are you currently performing research?  Yes  No

If yes: __________________________________________________

(Name of Lab)  (Name of Professor)

(Title of Project)

Please return your application to Kelli Ching at Holmes Hall 207C.
V. Financial Aid / External Awards Information:

All Students: Are you receiving financial aid for the 2012-2013 year? ☐ Yes ☐ No

Please provide your Financial Aid Package and Cost of Attendance for 2012-2013.
Go to: https://myuh.hawaii.edu/cp/home/displaylogin and log in
Click on the “Financial Aid” tab
Click on “Award by Aid Year”
Select “2012-2013”
Click on the “Award Overview” tab
Print and turn in with your completed application

External Awards: If you have received scholarships or awards that are not listed on your Financial Aid package form, please list the award name and amount:

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Extenuating Circumstances (optional):

If you feel that your Financial Aid package does not reflect your financial need or you have extenuating circumstances, please write a statement explaining your situation. Feel free to use additional paper.

Please return your application to Kelli Ching at Holmes Hall 207C.
Before turning in your application, please make sure that the following items are completed and included in your application packet. Incomplete applications will not be accepted.

☐ NHSEMP Scholars Program Application – fully completed, signed, and dated as indicated
☐ Personal Statement
☐ Financial Aid Package & Cost of Attendance Information
☐ Current Resume
☐ List of References
☐ Current WH-1 Form
☐ Media Release Waiver
☐ Optional – Book Certification Form & Original Book Receipts (for undergraduate students only)

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“I hereby certify that the above information is true to the best of my knowledge.”

Signature of Applicant: ________________________________ Date: ____________________