



S.C. Governor's School for Science and Mathematics

Application for Admission

Student Application Form

(Deadline: Postmarked March 1st of sophomore year)

(Attach Photo Here)

Directions: The applicant must complete this form and return it to the Application Coordinator. Please note that some questions will need to be answered on a separate sheet of paper and attached to the Student Form. The Application Coordinator must return the completed application to GSSM postmarked by March 1 of the student's sophomore year.

Student Name: _____
Last
First
Middle
Prefer to be called

Mailing Address: _____
Street

City
State
Zip
County (not country!)

Congressional District: you may need to call voter registration in order to provide the district in which you reside.

This item is not optional, you must check one: 1 2 3 4 5 6

Phone: _____ Birthday: ____/____/____ SSN: _____

*Gender: Male___ Female___ Are you SC resident? Yes___ No___ Are you a US Citizen? Yes___ No___

Current grade level in school: _____ E-mail address: _____

*Ethnicity: African Am. Asian Caucasian Native Am. Hispanic Bi-Racial
 Other _____

Parent or Guardian Name(s): _____

Address (if different from above): _____

Daytime phone number(s): _____

Parent Occupation(s): _____

With whom do you live: Both Parents___ Mother___ Father___ Other (specify) _____

Current High School: _____

High School Address: _____
Street
City
Zip

Guidance Counselor: _____
Name
Phone Number
e-mail

Application Coordinator: _____
Name
Phone Number
e-mail

***Note: No student will be denied admission based on race, sex, religion, or national origin.**

1. Have you visited or toured the campus of the SC Governor’s School for Science & Mathematics (i.e., GSSM Summer Science Program, Preview Day, shadowed a GSSM student, etc.)?

2. All applicants are required to visit the campus before or during the application process. Is there a certain date you would like to visit? Please specify a date you would like to tour GSSM and an Admissions representative will contact you.

3. Have you had any older siblings attend GSSM? Please give us the name and year of graduation from GSSM.

4. Name(s), position or title, and address of anyone who encouraged you to apply.

5. What standardized test score/s are you submitting with your application? (check all that apply)
 GSSM requires at least one standardized test score from the students’ sophomore year. Please indicate the date/s of tests taken. If you did not take the PSAT or PLAN of your sophomore year, you must take the SAT or ACT before the March 1st application deadline. You may have your SAT scores reported directly to GSSM (College Board code is 6073) or you may include a copy of the score report with your application.

PSAT (Test Date _____) SAT (Test Date _____)

ACT (Test Date _____) PLAN (Test Date _____)

6. Please list your extracurricular activities, both organized and individual, during the past three years (i.e., Clubs, Organizations, Sports, Volunteer projects, etc.). **Please include any summer workshops or camps in your list.**

Activity	Leadership Position	School Year of Participation
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. Please list any awards that you have received, both in and out of school, during the past three years (i.e., academic, musical, athletic, etc.). **Please do not send copies of awards at this time.**

Award	Year	Individual or Team
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**** Note: Respond to questions #8 through #13 on separate sheet/s of paper and attach to your application ****

8. What academic area is your favorite? Why? Please discuss your particular interest in this academic area.
***** (Please respond on a separate sheet) *****
9. Describe a project or task you have completed on your own. This may include a school activity, an extracurricular activity, or a community project.
***** (Please respond on a separate sheet) *****
10. If you are invited to attend the Governor’s School, you will be asked to live, study, and work in a community in which all members contribute. Describe the contributions you will make to the school. Describe your special abilities, skills, and experiences that qualify you for admission.
***** (Please respond on a separate sheet) *****
11. Life at the Governor’s School will represent a significant challenge. Describe in paragraph form, a situation that you experienced difficulties or overcome adversities. Explain how you coped with this situation and what you learned from it.
***** (Please respond on a separate sheet) *****
12. Why have you applied to GSSM? Please explain.
***** (Please respond on a separate sheet) *****
13. What else would you like the GSSM Admissions Selection Committee to know about you that has not already been covered in this application. This is your opportunity to give the committee a sense of who you are as an individual.
***** (Please respond on a separate sheet) *****



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The responsibility of the school and the welfare of its applicants can be met only if full and accurate information is provided. Please read the following carefully.

Signatures:

For the Applicant:

I hereby affirm that all the information on this application is correct and that all written responses are my original work.

I received editorial assistance preparing my responses from: (check all those which apply)
a teacher ___ a friend ___ a parent ___

Applicant's Signature: _____

Date: _____

For the Parent or Guardian:

My child has my permission to apply to the South Carolina Governor's School for Science and Mathematics. I hereby give my permission to my child's high school to release school records with this application.

Parent or Guardian's Signature: _____

Date: _____

Parent or Guardian's Signature: _____

Date: _____

To be completed by parent/ guardian.

On a separate sheet of paper, please explain how the South Carolina Governor's School for Science and Mathematics can enhance your child's education. Please provide any additional information that the Selection Committee should consider when evaluating your child's application to GSSM. Please attach separate sheet/s of paper to this application.

Optional Statement:

GSSM attempts to identify those applicants whose previous school grades or admission test scores may under predict academic success. Factors may include (1) a permanent physical disability; (2) a temporary health problem which significantly affected an otherwise exceptionally good academic record; (3) from an economically disadvantaged environment; (4) has completed an exceptionally rigorous academic program; (5) has other exceptional circumstances; or (6) does not speak English at home. This information is considered with the applicant's academic credentials.

On a separate sheet of paper, describe any factors like those listed above that you believe the selection committee should consider as it reviews this application for admission to GSSM.

Please submit this form, along with any additional sheets of responses to your Application Coordinator. Your Application Coordinator is responsible for submitting 1.) Student Application Form, 2.) your transcript, 3.) first semester sophomore grades, 4.) current courses, 5.) Guidance Counselor Form, and 6.) English, Math, and Science Teacher Recommendation Forms to GSSM by March 1st.

• 401 Railroad Ave. • Hartsville, SC 29550 • (843) 383-3944 • Fax: (843) 383-3903 • e-mail: admissions@gssm.k12.sc.us
• GSSM website: www.scgssm.org

Application Deadline: March 1st of sophomore year