

**LOS ANGELES BRIDGE for MINORITIES**  
**to BIOMEDICAL CAREERS RESEARCH PROGRAM**

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Pasadena City College; East Los Angeles College; Los Angeles City College;  
California State University, Los Angeles  
and the NATIONAL INSTITUTES OF HEALTH

**Participant Information**

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_

Social Security # \_\_\_\_\_ Date and Place of Birth \_\_\_\_\_

Name & Location of High School \_\_\_\_\_ Graduated \_\_\_\_\_

U.S. Citizen  Yes  No If not, country of citizenship \_\_\_\_\_

Permanent Resident (give visa symbol and number) \_\_\_\_\_  
(must include additional document)

Ethnicity:  Black  Mexican-American  Mexican  Puerto Rican  
 Cuban  Other Hispanic: \_\_\_\_\_  American Indian  
 Alaska  Native Pacific Islander  Filipino(a)  Other: \_\_\_\_\_

Circle Class Level:  Freshman  Sophomore

Major \_\_\_\_\_ Expected Date of Graduation \_\_\_\_\_

Expected date of transfer to 4-year institution \_\_\_\_\_

Grade point average in Major \_\_\_\_\_ Overall grade point average \_\_\_\_\_  
(A= 4.00; B= 3.00; C= 2.00, D= 1.00)

**Career Goals:**

Select your planned educational objective after you graduate from a four-year institution?

Graduate School:  M.S/M.A.  Ph.D.  Combined MD/Ph.D.

Professional School:  Medical  Dental  Other

**Relevant Academic Preparation**

Please list all Chemistry, Physics, Mathematics, Biology and other science courses taken or in progress. If more space is needed, attach another page to this application form.

Course No.	Course Title	Institution	Grade	Term and Year

**Please attach the following to complete the application:**

- Transcripts of all your college and university work.
- A current resume
- Please describe any previous experience you have in research or related areas.
- Discuss the reasons why you wish to participate in this research training program.
- Comment on your educational and career plans after community college
- If there is a discrepancy between your grades in academic coursework and your potential, please explain.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Bridges Coordinator

\_\_\_\_\_  
Date

**Return completed information form to:**

East Los Angeles City College	Los Angeles City College	Pasadena City College
Dr. Armando R. Figueroa	Dr. Sean Phommasaysy	Dr. Khuloud Sweimeh
<b>East Los Angeles City College</b>	<b>Los Angeles City College</b>	<b>Pasadena City College</b>
1700 Cesar Chavez	855 N. Vermont Ave	1570 E. Colorado Blvd
Monterey Park, CA 91754	Los Angeles, CA 90029	Pasadena, CA 91106
323-265-8645	323-953-2605	626-585-7813
323-265-8506	323-953-2606	626-585-7007