



Ohio's STEM Ability Alliance
STEM Degrees and Careers for Ohioans with Disabilities

OSAADAYTON SCHOLARS PROGRAM

WRIGHT STATE STUDENT

REGISTRATION FORM

Today's Date: _____

Student Data

Name: _____ Date of Birth (mm/dd/yyyy): _____

SSN: _____ University ID: _____ Email: _____

Permanent Address: Street _____ City _____

State _____ Zip _____ Cell Phone : _____ Home Phone: _____

Race: White; American Indian/Alaska Native; Asian; Black/African American; Native Hawaiian/Pacific Islander

Ethnicity: Hispanic or Latino? ___ US Citizen? ___ Veteran? ___ Displaced Worker? ___ Gender: Male/Female

Student Status

- Check one and complete details:

___ Prospective/New First Year WSU Student

___ Transfer Student -- Previous University or College name _____

I have completed ___ semester hours OR ___ quarter hours toward a degree.

___ Current WSU Student

I have completed ___ quarter hours toward a degree.

- Preferred entry to OSAA Scholars Program: Quarter _____ Year _____

- Declared academic major _____

- Intended major if undeclared (you may list up to 3) _____

- GPA _____ (Enter high school GPA if you are a new freshman)

- GPA in major (if applicable) _____

- Disability Certification: What school or institution has documented and maintains a record of the existence of your disability? _____

Career Plans

- Briefly describe your current career plans after completing your undergraduate degree:

(e.g. Become a _____. Work in the _____ industry. Attend graduate or professional school in _____ field. etc)

Four horizontal lines for writing career plans.



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