STEM Interest Application

Sweetwater Middle School
3500 Cruse Rd NW,
Lawrenceville, GA 30044

Student's First Name: Student's Last Name: Student's Middle Name:

GCPS ID#: Current Grade:

Parent(s)/Guardian(s) Name(s):

Address: Apt/Unit#:

City: State Zip Code:

Contact Phone Number: ***Email Address:***

Rank yourself on the following:

1. Interest in Science
   No Interested 1 2 3 4 5 Super Interested

2. Interest in Math
   No Interested 1 2 3 4 5 Super Interested

3. Interest in English & Language Arts
   No Interested 1 2 3 4 5 Super Interested

4. Enthusiasm for Learning
   Need Improvement 1 2 3 4 5 Outstanding

5. Independence of Thought
   Need Improvement 1 2 3 4 5 Outstanding

6. Ability to Problem Solve
   Need Improvement 1 2 3 4 5 Outstanding

7. Ability to Work Independently
   Need Improvement 1 2 3 4 5 Outstanding

8. Ability to get along with new individuals.
   Need Improvement 1 2 3 4 5 Outstanding

9. Ability to work well in groups.
   Need Improvement 1 2 3 4 5 Outstanding

1. Write a brief explanation stating why you are interested in joining the Sweetwater STEM program.

2. Is there any other information you feel we need to know regarding your application?