STEM Enrollment Form

Applicant Information

First Name: ___________________________ Last Name: ___________________________

High School: _________________________ School System/District: _________________________

School Address: ________________________________________________________________

Program of Study: ______________________ Term: __________________________

Phone number: ___________________________ E-mail: __________________________

Signature: ___________________________ Date: __________________________

Last Four Digits of SSN: ______________

To Be Completed by High School Principal

Principal: By providing your signature below, you are confirming that the person noted above is a current STEM teacher at your school and has permission to be enrolled with the JHU EP graduate program.

Principal’s Name: ______________________________________________________________

Signature: ___________________________ Date: __________________________

Phone number: ___________________________ E-mail: __________________________

Once all parts of this form have been completed, please scan and e-mail to ep-stem@jhu.edu or visit the webpage indicated below for more submittal options.

Please note, a new STEM Enrollment form must be submitted prior to enrollment each semester.

This form is not an application or registration. Please visit our webpage for application and registration information: ep.jhu.edu/stem

Engineering for Professionals – Whiting School of Engineering