

MIDDLE SCHOOL SUMMER SCIENCE ACADEMY

Name _____
Last First FULL Middle Name
(or NMN if no middle name)

Current School Grade* _____ ***Note: Planned attendance in a public school in a designated Appalachian county during school-year 2012-2013 required.**

Parent/Guardian 1 Name _____ Address _____
Street State Zip Code

Parent/Guardian 2 Name _____ Address _____
Street State Zip Code

Have you participated in a hands-on math or science camp on a previous occasion?* _____
Yes No

***Note: Applicants who have not previously participated in a math/science camp will receive priority.**

If your answer to the above question is yes, please complete the following:

- Name of camp you attended: _____
- Where was the camp held? _____
- When did you attend? _____
- Name of organization sponsoring the camp: _____
- Were you nominated to attend? _____; By whom? _____
Yes No

Are you planning to attend college or other post-secondary school? _____
Yes No Not sure yet

Did either of your parents attend college or university? _____
(Check 'yes' if they attended, whether or not they graduated.) Yes No

If you have older brothers or sisters, have any of them attended college or university? _____
Not Applicable Yes No

Does your school have access to the Internet? _____
Yes No

Do you have access to the Internet at home? _____
Yes No

TEACHER, SCHOOL COUNSELOR, OR SCHOOL ADMINISTRATOR OF APPLICANTS, PLEASE READ AND SIGN THE FOLLOWING:

_____ is able to follow directions and work in a team, and will likely benefit by participating in the Appalachian Regional Commission/Oak Ridge National Laboratory/Oak Ridge Associated Universities 2012 Middle School Summer Science Academy.

Signature of School Official Date

Print Name and Title You may attach a letter of reference if desired.