

# 2018 Summer Experience in Science and Engineering for Youth

July 14 – 19, 2019

Application DUE DATE: May 17, 2019 (postmark)

## Application Form – part 1 or 2

Please type or print clearly with black ink

### APPLICATION REQUIREMENTS

- 1) Completed application (below).
  - 2) **Handwritten 1-2page Essay (VERY IMPORTANT)** - Information about yourself (activities and interests), your family, and **WHY you want to attend SESEY.**
  - 3) High School Transcript (unofficial is OK)
- Please visit <http://cbee.oregonstate.edu/sesey> for more information.

Today's Date \_\_\_\_\_

Name \_\_\_\_\_

Hometown (City and State) \_\_\_\_\_

High School \_\_\_\_\_

Grade (2017-18 academic year) \_\_\_\_\_ Cell (optional) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender M or F (for housing room assignments)

**Ethnicity:** Hispanic/Latinx Black/African-American American Indian/Alaska Native Asian White  
Native Hawaiian/Pacific Islander Other (specify) \_\_\_\_\_

Special needs (specify) \_\_\_\_\_

Tuition assistance required? No Yes ( ½ or Full )

**Email address (required)** \_\_\_\_\_

\*\*\*\*NOTE: email is the method that will be used to contact applicants of their selection.\*\*\*\*

Name of Parent/Guardian \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Work (Cell) Phone \_\_\_\_\_

Contact email address \_\_\_\_\_

Emergency Name (friend, relative) \_\_\_\_\_

Emergency Phone \_\_\_\_\_

Favorite Subjects and Extracurricular activities (sports, clubs, hobbies, etc.):

Signature of Student \_\_\_\_\_

# 2018 Summer Experience in Science and Engineering for Youth

## Application Form – part 2 of 2

*Please type or print clearly with black ink*

### To Be Completed by Parent or Guardian

#### Permission to participate in the Summer Experience in Science and Engineering for Youth

**Please complete and sign ALL THREE SECTIONS below. Must be signed by a parent or legal guardian**

1. I give permission for \_\_\_\_\_ to participate in the summer science and engineering camp **Summer Experience in Science and Engineering for Youth (SESEY)**.

**Signature of Parent or Guardian** \_\_\_\_\_

2. Pictures are often taken during the activities. Circle yes/no and sign below to give the program permission to use your student's picture(s) for publicity. **YES or NO**

**Signature of Parent or Guardian** \_\_\_\_\_

3. If my student becomes ill or injured when away from home during the program activities, you have my permission to seek medical treatment for him/her. I understand I will be contacted immediately if medical treatment is necessary.

List any known health concerns, such as allergies or allergic reactions to medications, dietary restrictions

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Health Insurance Company	Identification/Group	Insured Person's Name
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**Signature of Parent or Guardian** \_\_\_\_\_

**DATE:** \_\_\_\_\_