Summer Academy in the Engineering Department at UCO
A 2016 Summer Academy for Students Entering Grades 8-10
Department of Engineering & Physics
University of Central Oklahoma

APPLICATION FORM

☐ Session 1: June 6 -10. ☐ Session 2: June 13 - 17 ☐ Session 3: June 20 - 24
(Check one of the boxes above or, if you can attend other sessions, check the boxes but indicate which session you prefer)

Review of applications will begin: Friday April 1, 2016.

Name: ________________________________________________________________
Address: ____________________________________________________________________________
________________________________________________________________________________________
Phone: ( ) __________________________ Email: ____________________________________________

High School: ___________________________________________________________ Gender: ☐ F ☐ M

Your classification for Fall Semester 2016: ☐ 8th Grade ☐ 9th Grade ☐ 10th Grade

Which science and math courses have you already completed? (Check all that apply)
☐ Algebra I ☐ Biology ☐ ________________
☐ Algebra II ☐ Physical Science ☐ ________________
☐ Geometry ☐ ________________

Indicate the strength of your computer skills in each of the following (0=none, 1=some, 2=good, 3=strong).
[Note: This information is used by the academy directors to build balanced student teams and is not used as selection criteria]

Excel: _____________ Word: _____________ Power Point: _____________

Have you participated in a previous Summer Academy? ☐ Y ☐ N
If so, where and when? ___________________________________________________________________

Do you understand that this academy is for commuters only (no housing provided)? ☐ Y ☐ N

The following information is voluntary and is requested only in accordance with the 1968 Civil Rights Act as amended.

My ethnicity is: ☐ African American ☐ Asian ☐ Alaskan or Native American
☐ Hispanic ☐ Caucasian ☐ Other: ________________________________

Applicant’s Signature __________________________ Date __________________________

Parent’s Signature __________________________ Date __________________________

1. Please ask a science teacher to complete and return a recommendation form.
2. Please attach a one-page essay describing your reasons for wanting to participate in a summer academy in applied science and technology.

Return this form, recommendation form, and essay to: Dr. Ronald C. Miller
Department of Engineering & Physics
University of Central Oklahoma
100 N. University Drive
Edmond, OK 73034