

2017 Greater Philadelphia STEM Center Summer Camp at Temple University

Camp Information:

Camp Dates: July 23rd – 27th & 30th – 3rd, 2017

Camp Theme: “SeaPerch Science and Robotics”

Camp Description: The Greater Philadelphia STEM Center (GPSC) Summer Camp at Temple University is a 2-week residential camp that provides activities, experiments, projects, and field experiences for students entering 6th, 7th, or 8th grade in the fall of 2017. Students attend the camp free of charge. Students currently in grades 5, 6, or 7 who have an interest in science and mathematics, at least a B average in science and mathematics courses and a passing score on the state’s standardized science and mathematics tests are eligible to apply. The above camps aim to increase awareness and interest in STEM careers, particularly in engineering, power and energy, and national security and defense. Additionally, the camps will encourage students and allow them to see themselves as students and in scientific careers through a college environment and laboratory exposure, scientist and engineer interaction, and industrial tours.

The camps will be held on the main campus of Temple University, 1801 N. Broad St., Philadelphia, PA 19122. Residential camp students will stay in a dorm on the main campus of Temple University.

Camp participants will be selected from the Greater Philadelphia Metropolitan Area.

Application Process:

- Parent/Guardian and student complete the attached Student Application Form (pages 2 & 3).
- Parent/Guardian or student gives the request for records to the student’s school registrar (page 6) and works with the school to submit the requested documents.
- Parent/Guardian or student gives a recommendation form to the student’s current teacher, coach, or religious figure (page 7).
- Student writes a 250-word essay. Instructions for the essay are on pages 4.

Send the completed Student Application Form, essay, records and recommendation to **Temple University, CST Office of the Dean, 1115 W. Polett Walk, Gladfelter Hall, Room 628 (025-29), Philadelphia, PA 19122, Attn: STEM Camp**. All requested documents are due by the deadline date, **June 2, 2017**. If all requested documents are not received by the deadline date, the application will not be considered. You will receive notification on the status of the application no later than **June 9, 2017**. If you have questions or need additional information, contact Ms. Tiffany Gilles at 267-559-3568 or stemcamp@temple.edu.

PLEASE KEEP THIS PAGE FOR YOUR REFERENCE



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STUDENT INFORMATION

APPLICATION DEADLINE IS JUNE 2, 2017

Please print in blue or black ink or type. Please provide all requested information.

Name of Student: _____

Home Address: _____

_____ City State Zip Code

Ethnicity: _____ Date of Birth (month/date/year): _____

Gender: Female _____ Male _____ Adult T-shirt Size: _____

Name of School student is currently attending: _____

Type of School (Check all that apply):

____ Elementary (K – 5); ____ Middle (6 – 8); ____ K – 8; ____ K – 12; ____ Other

____ Public ____ Parochial ____ Private ____ Charter

Current Grade level _____ School District/Parish: _____

How did you find out about the summer camps at Temple University?

List school organizations, any science and/or mathematics activities (Science Fair, math club, after school programs, summer programs, etc.) you have participated in 2015, 2016 and/or 2017. Include awards received and offices held. You may attach a separate sheet, if needed.



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Name of Student: _____

School: _____ Current Grade level: _____

PARENT/LEGAL GUARDIAN INFORMATION

Instructions: Please complete the following information for at least one custodial parent or legal guardian, both if available.

Name of Parent or Legal Guardian: _____

Employer: _____

Occupation: _____

Daytime Phone No.: _____ Home Phone No.: _____

Cell Phone No.: _____

E-mail Address: _____

Signature of Parent or Legal Guardian

Date

Name of Parent or Legal Guardian: _____

Employer: _____

Occupation: _____

Daytime Phone No.: _____ Home Phone No.: _____

Cell Phone No.: _____

E-mail Address: _____



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REQUEST FOR RECORDS FORM

Applicant instructions: You or your parent or legal guardian must complete the information below and give this form to your school's registrar. A parent or legal guardian must sign this request so that the registrar can release the records.

Dear Registrar:

My child, _____ is applying to attend a summer STEM camp at Temple University this summer. We are requesting a copy of his/her official records for this student (grades and standardized test scores) and this completed form to be forwarded by **JUNE 2, 2017** to:

**Temple University, CST Office of the Dean
1115 W. Polett Walk
Gladfelter Hall, Room 628 (025-29)
Philadelphia, PA 19122
Attn: STEM Camp**

The records must include a copy of the most recent grades/report card and standardized test scores. This form, along including information below on whether this child receives free or reduced lunch, must accompany the records.

I hereby grant permission for the release of the information requested on this form regarding my child.

Signature of Parent or Legal Guardian

Date

Name of Student (please print)

Student ID Number

Signature of Student

School

Homeroom Teacher

Grade

Date of Birth



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The school registrar or appropriate administrator must complete the following.

Does this child receive **FREE** or **REDUCED** lunch? **Yes** **No**

If yes, which? **Free Lunch** **Reduced Lunch**



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**Recommendation from Current Teacher, Coach, or Religious Figure
For a student applying to the 2017 GPSC Summer Camp at Temple University**

Name of Student Applicant _____

Relationship to Person Giving Recommendation _____ Year 2016-2017

Name of Person Giving Recommendation _____

Directions: The student who has given you this form is applying to attend a summer STEM camp this summer. You have taught or have a relationship with this student, so you can tell if she/he is a good candidate for this summer STEM opportunity.

Please complete the chart below and write a letter of recommendation for this student. Place completed form and letter of recommendation in an envelope, seal it, and write your name across the sealed flap, so that your comments will be private. Please return the sealed envelope to the student **as soon as possible** so that he/she may include it in their application packet, which is due by **JUNE 2, 2017**.

Please put an **X** in the appropriate column for each of the following statements:

	Very Much	Often	Sometimes	Rarely	Never
This student was eager to learn.					
This student cared about other students.					
This student was late to class.					
This student skipped classes.					
This student turned in homework and projects on time.					
This student participated in class, group and hands-on activities.					
This student worked independently and as a team member.					
This student was an asset to the class.					
This student participated in co-curricular activities (science fair, science club, etc.).					

Circle the best answer to the following question: Would you like to teach this student in another class or program?

Yes, definitely

Maybe

Definitely not

In your letter of recommendation, please include this student’s outstanding achievements, the qualities this student possess that makes him/her stand out from the rest, and any concerns you would like to share. Your comments will be especially useful in the selection process. Thank you.