



**Explorations iCAMP for math/science**

Student Application 2009

**STUDENT INFORMATION**

Please print or type

Student Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street City State Zip

Phone: \_\_\_\_\_ Student E-mail: \_\_\_\_\_

Emergency Number: \_\_\_\_\_ Emergency Contact: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender:  Male  Female

Ethnicity (optional):  Native American  Black/African American  Asian/Pacific Islander  Multi-Racial  
 (Check all that apply)  Hispanic/Latino  White/Caucasian  Other \_\_\_\_\_

Do you have a physical disability that may require special accommodations?  Yes  No

Do you have any special dietary needs? If so please explain: \_\_\_\_\_

**PARENT OR LEGAL GUARDIAN INFORMATION**

Student lives with:  Father  Mother  Both  Other: \_\_\_\_\_

Father's/Male Guardian's Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Mother's/Female Guardian's Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**CAMP OPTION (Please select preference below)**

- Non-residential (Day camp only)
- Residential

*Non-residential attendees will meet Monday through Friday from 8 a.m. until 5 p.m., and residential campers will be housed Sunday through Thursday nights in a University residence hall, supervised by an experienced residential staff.*

**Please attach a brief personal statement explaining why you want to attend Explorations iCAMP for math/science and what you hope to learn and experience.**

**I have reviewed the above information. My signature below indicates that all the information contained in my application is factually correct and honestly presented.**

\_\_\_\_\_  
Student Signature Date Parent Signature Date

**Application Deadline  
 March 15, 2009**

Attendance will be limited to 75 students. Priority will be given to applications received by the deadline; further selection will be made based on students' personal statements.  
 All applicants will be notified of admission status by March 31.

**Do not send payment with application. Payment will be requested after student is accepted to the camp.**

**Please return completed application to:**

Gifted & Talented Scholars  
 1 University of Arkansas  
 200 Hotz Hall  
 Fayetteville, AR 72701

479.575.3553 (office)  
 479.575.4279 (fax)