

# 2011 Women in Technology Application

*For gifted and talented young women entering grades 8-12*

Session I: June 19-24 • Session II: June 26-July 1

Please type or print all information.

Additional sheets may be attached if necessary.

*Applications will be accepted until the program is full.*

*Be part of an exclusive program  
taught by University professors and offered  
to only a select group of 16 participants.*

## Personal Information

Name (*last, first, middle*) \_\_\_\_\_

Address \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_

City \_\_\_\_\_ State/Prov. \_\_\_\_\_

Zip/Postal code \_\_\_\_\_ Phone: \_\_\_\_\_

**All communications are via e-mail. E-mail address information required.**

**Please remove LSSU.EDU from your spam filter.**

Applicant's e-mail: \_\_\_\_\_ Parent's e-mail: \_\_\_\_\_

Name of Parent(s) or Guardian(s) \_\_\_\_\_

Do you have any impairments — physical, mental or medical — that would interfere with your ability to participate in this program?  yes  no

If yes, on a separate sheet please explain and indicate if disability support services will be required.

## Academic Information

Year in school in 2011-12:  8th  Fr.  So.  Jr.  Sr.

Grade point average \_\_\_\_\_ ACT score (if available) \_\_\_\_\_ SAT score (if available) \_\_\_\_\_

(or) other academic information: \_\_\_\_\_

Name and address of school: \_\_\_\_\_

List the courses you are currently taking:

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

If you intend to go to college, what area do you plan to major in? \_\_\_\_\_

## Extracurricular Activities:

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

### Required:

- Attach an essay (100 words or more) stating why you would like to attend the **Women in Technology** program and what you expect to gain from this experience.
- At least one letter of recommendation from a school teacher, counselor or staff member. This can be sent directly to LSSU via regular mail, submitted with this application form, or by e-mail to: [engineering@lssu.edu](mailto:engineering@lssu.edu) with a subject line of "WIT Camp - 'applicant's name'."

Have you applied to the **Women in Technology** program before?  yes  no

• If you applied, were you accepted?  yes  no

• Were you guaranteed acceptance for Summer 2011?  yes  no

**CAMP DATES (please check all dates for which you are available):**

- June 19-24, 2011
- June 26-July 1, 2011

**ROOM & BOARD (please indicate plan preference):**

- Plan A (Live-in) – Fee: \$695\***  
The live-in student rate of \$695 per week includes academic and recreational activities, plus room and meals in a residence hall.
  - If possible, I would like to room with a friend.  
Please list one name only.  
Roommate's Name: \_\_\_\_\_
- Plan B (Day Student) – Fee: \$595\***  
The commuting student rate of \$595 per week includes academic and recreational activities and noon meals. The students may return home each day at the end of the afternoon activities, but are strongly encouraged to return for evening recreational activities.

**\*The cost to offer this program is \$995 per participant. All participants receive the reduced rates of \$695 (live-in) or \$595 (day student) as a result of an automatically awarded \$300 LSSU Engineering scholarship.**

**DEPOSIT:** Application must be accompanied by a \$100 deposit (in U.S. funds) made out to LSSU. Deposit is refundable upon cancellation until May 31, 2011. The balance should be paid upon acceptance into the program. No refunds will be given due to late arrival or voluntary departure. *Deposit will be refunded if applicant is not selected into the program.*

- Enclosed please find \$\_\_\_\_\_ (U.S. funds) which is at least \$100 per session of the total fee. The balance will be paid upon acceptance into the program.**

**SCHOLARSHIPS:** If you are requesting a scholarship award in addition to the automatic \$300\*, please complete and return the Scholarship Application form. LSSU is seeking additional sources for scholarship funding. These scholarships, if available, will be awarded on a first-come, first-serve basis to qualified individuals. Some scholarships were made possible through Perkins funding from the Michigan Department of Education.

**REGISTRATION:** Students register at the Center for Applied Sciences and Engineering Technology on Sunday from 4-5 p.m. EST. The **Women in Technology** program begins following registration.

**DEPARTURE:** Friday at 3 p.m.

I/We approve the application of \_\_\_\_\_ for the **Women in Technology** program at Lake Superior State University. All information contained within this document is true and accurate to the best of my/our knowledge.

\_\_\_\_\_  
Signature of Parent(s) or Guardian(s)

\_\_\_\_\_  
Date

**Mail application and \$100 deposit to:**

Women in Technology Program  
School of Engineering & Technology  
Lake Superior State University  
650 W. Easterday Ave.  
Sault Ste. Marie, MI 49783

If you have any questions, please contact the  
School of Engineering & Technology  
Phone: 906-635-2207  
E-mail: [engineering@lssu.edu](mailto:engineering@lssu.edu)

All brochures and forms can be found at  
**[WWW.LSSU.EDU/ENG/CAMPS](http://WWW.LSSU.EDU/ENG/CAMPS)**

**Parental Consent and Waiver of Responsibility**

**PARENTAL CONSENT:**

In consideration of the acceptance of \_\_\_\_\_ as a student in the Lake Superior State University Women in Technology program, the applicant agrees that Lake Superior State University and/or its staff, will not be held responsible for any accidents or loss of personal property, however caused, and agrees to release of the University from all claims or damages which may rise as a result of such accidents or loss. It is further agreed that all risks attendant to watching and/or participating in the Lake Superior State University Women in Technology program are assumed by the student and parents and/or guardian and that this assumption is acknowledged and approved by their signature hereto.

The Lake Superior State University Women in Technology program reserves the right to use any pictures taken during the program for advertising and/or instructional purposes.

I/we have read the foregoing, have explained its meaning to our daughter or ward, and understand and approve of and consent to the terms and conditions as stated.

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

\_\_\_\_\_  
Date

**AUTHORIZATION:** In case of illness and/or injury, permission is granted for medical treatment to be rendered to my daughter/ward. I understand that I will be notified in case of serious illness. All medical bills incurred by the patient will be the responsibility of the parent or guardian. The summer program does not bill insurance companies.

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

\_\_\_\_\_  
Date

Lake Superior State University School of Engineering & Technology reserves the right to cancel a program if there are insufficient qualified applicants. The LSSU Women in Technology program reserves the right to terminate the stay of any student without refund when it is deemed to be in the best interest of either the student or the Women in Technology program.