

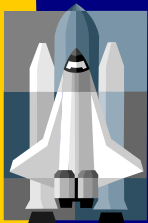
Oklahoma State Regents for Higher Education

Hosted by Oral Roberts University

June 5-9, 2017  
with a follow-up event on  
August 19, 2017

# MATH, SCIENCE, AND ENGINEERING SUMMER ACADEMY

*“A Hands-On Program in Mathematics  
and Science”*



This residential summer academy will help students entering the 8th or 9th grade better understand the natural world and develop critical thinking skills through a series of integrated, project-based learning experiences. Field trips, laboratory experiences, and applied technologies will all be used to train students to explore, conjecture, and verify relationships in problem solving.

Campus facilities, such as basketball courts, swimming pool, and recreational fields, will be available to students during structured recreational time. Students will live on-campus in dorms supervised by Resident Advisors and security.

## *Highlights*

- Build and launch rockets
- Investigate a crime scene using DNA
- Take field trips to explore space and natural science
- Spend a week at a college campus
- Enjoy sports and fun activities

## **For more information, or to return an application, contact:**

Dr. John Matsson  
Engineering Department  
Oral Roberts University  
7777 South Lewis Avenue  
Tulsa, OK 74171  
Phone: 918-495-6935  
Fax: 918-495-7648  
Email: [jmatsson@oru.edu](mailto:jmatsson@oru.edu)

**ORAL ROBERTS UNIVERSITY**  
**Math, Science, and Engineering Summer Academy Application**  
*"A Hands-On Program in Mathematics and Science"*  
**June 5 - 9, 2017 and August 19, 2017**

**Application Procedure:**

1. Complete and submit this application.
2. Submit a completed Student Recommendation form from a Math or Science Teacher, Principal, or Counselor.
3. Submit a one-page essay indicating why you wish to participate in this program.
4. Commit to attend the fall follow-up activity on August 19, 2017.

**NOTES:**

- a) Applicant must be entering the **eighth** or **ninth** grade in the Fall of 2017.
- b) Social Security number *must* be recorded on application.
- c) **Both forms** are to be completed & returned on/before deadline.
- d) Accepted applicant must provide medical insurance information.
- e) School transcripts and test scores are helpful but not required.
- f) Selected participant should be on campus by 9:00am on Monday and picked up by 4:00pm on Friday.

**FOR THE STUDENT**

**Please print clearly. The Oklahoma Regents for Higher Education require the information below be completed.**

<hr/> <i>LAST NAME</i>	<hr/> <i>FIRST NAME</i>	<hr/> <i>MIDDLE NAME</i>	<input type="checkbox"/> <i>Male</i>	<input type="checkbox"/> <i>Female</i>
<hr/> <i>STREET ADDRESS</i>	<hr/> <i>APT.#</i>	<hr/> <i>SOCIAL SECURITY NUMBER</i>	<hr/> <i>GRADE LEVEL FOR FALL 2017</i>	
<hr/> <i>CITY:</i>	<hr/> <i>COUNTY:</i>	<hr/> <i>ZIP:</i>	<hr/> <i>BIRTHDATE: YYYY/MM/DD</i>	
<hr/> <i>NAME OF SCHOOL:</i>	<hr/> <i>LOCATION OF SCHOOL (County)</i>	<hr/> <i>LOCATION OF SCHOOL (City)</i>	<hr/> <i>STUDENT E-MAIL ADDRESS</i>	
<p><b>For reporting purposes only:</b> Please circle the word(s) that best describe(s) your ethnic background: American Indian/Alaska Native, Asian, Black/African American, Hispanic, Native Hawaiian/Other Pacific Islander, White, Two or More, Prefer not to respond or none of these apply.</p>				
<p>Name of Parent/Guardian: _____</p>				
<p>Day Phone ( ) _____ Evening Phone ( ) _____</p>				
<p>Cell Phone ( ) _____ Alternate Cell Phone ( ) _____ Parent/Guardian E-mail _____</p>				

**Return application information to:**

Dr. John Matsson  
 Engineering Department  
 Oral Roberts University  
 7777 South Lewis Avenue  
 Tulsa, OK 74171  
 918-495-7648(fax); scanned application to jmatsson@oru.edu

\_\_\_\_\_  
 Parent/Guardian Signature Date

**APPLICATION DEADLINE:** First Deadline: April 3, 2017; Second Deadline: April 28, 2017

Several hundred Oklahoma students are applying for State Regents Summer Academies. Students attending more than one State Regents Summer Academy may prevent many other students from having this opportunity. Although some Academies do not have waiting lists, others have very long waiting lists.

So that more students may attend a State Regents Summer Academy, I will notify Academy Directors if I am accepted for more than one 2017 Academy.

**Participant/Applicant signature** \_\_\_\_\_

## PERSONAL SKETCH

Please write a one-page personal sketch that explains:

- why you wish to participate in the program.
- your interest and achievements in math and science.
- your future job aspirations.

**This section weighs heavily in our selection process. Please type or write neatly. You may attach a separate typed page if you wish.**

---

Applicant Signature

---

Date

# STUDENT RECOMMENDATION FORM

(This form to be completed by a Math or Science Teacher, Principal, or Counselor)  
(Home school instructor is also acceptable)

**Applicant:** Please complete the top section of this form. Give the form, along with a stamped envelope, to your Math or Science Teacher, Principal, or Counselor. Please print or type.

Applicant's

Name: \_\_\_\_\_  
Last First Middle

Applicant's

Address: \_\_\_\_\_  
Street Number City County Zip

Applicant's Telephone: Daytime (\_\_\_\_) \_\_\_\_\_ Evening (\_\_\_\_) \_\_\_\_\_

(Optional) I hereby waive my right of access to the material recorded below:

Signature of Parent/Guardian: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_\_

---

---

**Evaluator:** Please complete this form and mail, fax or email scanned form to Dr. John Matsson, Engineering Department, Oral Roberts University, 7777 S. Lewis Ave., Tulsa, OK 74171, (918) 495-7648 (fax), [jmatsson@oru.edu](mailto:jmatsson@oru.edu). It is essential that your candid evaluation of this student be returned no later than April 28, 2017. Applicants CANNOT be considered without recommendations.

Please circle the number that best represents your evaluation of this student, and write comments that may help us in our selection process.

	Unsure	Low	→	High	PLEASE WRITE SPECIFIC COMMENTS ON EACH CATEGORY		
Attention	NA	1	2	3	4	5	_____
Attitude	NA	1	2	3	4	5	_____
Communication Skills	NA	1	2	3	4	5	_____
Cooperation	NA	1	2	3	4	5	_____
Diligence	NA	1	2	3	4	5	_____
Group Participation	NA	1	2	3	4	5	_____
Personal Maturity	NA	1	2	3	4	5	_____
Responsibility	NA	1	2	3	4	5	_____

**Acceptance into this program is extremely competitive. On the back of this page, please tell us what makes this student stand out among his/her peers. Both positive and negative feedback is helpful.**

Overall, I (check one response) \_\_\_\_\_ highly recommend, \_\_\_\_\_ recommend, \_\_\_\_\_ recommend with hesitation, or \_\_\_\_\_ do not recommend this student for acceptance into this summer Academy.

Evaluator: \_\_\_\_\_ Title: \_\_\_\_\_ School Phone: \_\_\_\_\_

School Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_