Oklahoma State Regents for Higher Education

Hosted by Oral Roberts University

June 10-14, 2013
with a follow-up event on
August 24, 2013

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, Computer Science, Physics, and Math
Oral Roberts University
7777 South Lewis Avenue
Tulsa, OK 74171
Phone: 918-495-6935
Fax: 918-495-7648
Email: jmatsson@oru.edu

ORAL ROBERTS UNIVERSITY

Math, Science, and Engineering Summer Academy Application

"A Hands-On Program in Mathematics and Science"

June 10 - 14, 2012 and August 24, 2013

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 24, 2013.

NOTES:

a) Applicant must be entering the **eighth** or **ninth** grade in the Fall of 2013.
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.

LAST NAME _____ *FIRST NAME* _____ *MIDDLE NAME* _____ ☐ *Male* ☐ *Female*

STREET ADDRESS _____ *APT.#* _____ *SOCIAL SECURITY NUMBER* _____ *GRADE LEVEL FOR FALL 2013* _____

CITY: _____ *COUNTY*: _____ *ZIP*: _____ *BIRTHDATE: YYYY/MM/DD* _____

NAME OF SCHOOL: _____ *LOCATION OF SCHOOL (County)* _____ *LOCATION OF SCHOOL (City)* _____ *STUDENT E-MAIL ADDRESS* _____

For reporting purposes only: *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, Prefer not to respond or none of these apply.*

Name of Parent/Guardian: _____

Day Phone ( ) _____ Evening Phone ( ) _____

Cell Phone ( ) _____ Alternate Cell Phone ( ) _____ Parent/Guardian E-mail _____

Return application information to:

Dr. John Matsson
Engineering, Computer Science, Physics, and Mathematics
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 5, 2013; Second Deadline: May 3, 2013

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 2013 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 and Physics Department, Oral Roberts University, 7777 S. Lewis Ave., Tulsa, OK 74171, (918) 495-7648 (fax), jmatsson@oru.edu. It is essential that your candid evaluation of this student be returned no later than *May 3, 2013*. 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:* _____