

**Application for Biotechnology Summer Camp
High School Students
(Summer 2013)**

All fields required

First Name _____ Applicants Email* _____

Last Name _____ Home Phone _____

Address 1 _____ Cell Phone _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

*Email is our primary form of communication. Please inform of any change in your email address after application submission

Gender Male Female

Citizenship US Citizen US Permanent Resident

High School _____ HS Counselor _____

H.S. Address 1 _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Entering Grade in fall 2013 Sophomore Junior Senior

Parent/Guardian Name _____ Relationship _____

Parent/Guardian Email* _____ Parent/Guardian Cell Phone _____

Program Date is July 7-July 13, 2013:

Residential
***Cost: \$900 (includes housing & meal plan)**

Non-residential (will commute)
***Cost: \$750 (includes meal plan)**

Application and Payment must be postmarked and/or received by June 15, 2013. Withdrawal before 6/15/13 for a full refund. After 6/15/13 – NO refund.

Personal Statement

Enter your personal statement describing why you want to attend the Biotechnology Summer Camp.

Certification: I certify that the information given on this application is complete and that I have completed this application with the full knowledge and consent of my parent(s) or legal guardian(s).

Please Sign or Type your name

Student Signature _____

Date: (mm/dd/yy) _____

Parent/Guardian Signature _____

Date: (mm/dd/yy) _____

*Parents – By signing above. I hereby give permission for my child to participate in the above indicated program. I am also indicating my agreement to all the terms and conditions of the enrollment listed on the website and upon this application.

After completing the application, please email, fax, or mail to the address below:

Biotechnology Summer Camp

IUP Research Institute

1179 Grant Street, Suite 1

Indiana, PA 15701

research-institute@iup.edu

Phone: 724-357-3934 or 724-357-2223

Fax: 724-357-7697

Payment: Checks can be made payable to the IUP Research Institute. Please mail in check with application or pay by phone with credit card (we accept MasterCard and Visa). To pay by phone call 724-357-3934 or 724-357-2223. Space is limited, so please note that we cannot hold your son/daughter's slot until payment, application, and medical authorization forms have been received.