

National Youth Science Camp 2001 Delegate Application Cover Sheet

You must be in 12th grade to apply.

Please type or print.

NAME: _____ **SEX:** ____M____F

The National Youth Science Camp will be held for four weeks between June 28 and July 23, 2001. Will you be available to participate during this entire period if you are selected? (*circle one*) **Yes** **No**

APPLICANT'S SIGNATURE: _____ **DATE:** _____

HOME ADDRESS: _____

CITY/STATE/ZIP: _____

HOME TELEPHONE: () _____ **E-MAIL:** _____

PARENTS'/LEGAL GUARDIANS' FULL NAMES: _____

SCHOOL NAME: _____

PRINCIPAL: _____ **SCHOOL TELEPHONE:** () _____

SCHOOL ADDRESS _____

CITY/STATE/ZIP: _____

PRINCIPAL'S SIGNATURE OF SUPPORT: _____

Your application should contain an original and one copy of the following, in this order: (1) Application Cover Sheet, (2) a letter giving your qualifications and reasons for applying, (3) a resume, (4) a recent transcript, and (5) a letter of support from a teacher or research mentor. PLEASE do not bind your application or place it in a folder. Staple items 1-5 together with one staple in the top left hand corner. For questions about the program and photos, visit www.sciencecamp.org.

MAIL FIRST CLASS an original and one complete copy of ALL information so that it is RECEIVED no later than Wednesday MARCH 21, 2001, to:

Kelly Riley, Policy Liaison
Office of the Governor
P.O. Box 139
Jackson, MS 39205-0139