

Student Application: Name _____



THE EARTH WE SHARE™
The 6th International Science Camp
"Creating a World of Science Experiences"
P.O. Box 890267
Houston, TX 77289

Dear Student:

Please complete and return all items listed:

1. **Form A** – Application: To be completed by student and signed by a parent or legal guardian.
2. **Form B** - School Recommendation: To be completed by a school guidance counselor or principal and sent with a current transcript that shows at least one grading period during the current school year. Provide a small envelope for your counselor/principal to enclose Form B and the transcript. Have them sign on the back flap after he/she has sealed it, so that the information may be kept confidential.
3. **Form C** – Teacher Recommendation: To be completed by a current teacher. Provide a small envelope for your teacher to enclose Form C. Have them sign on the back flap after he/she has sealed it, so that the information may be kept confidential.
4. **Form D** – Recommendation from Community Member: To be completed by a community member. Provide a small envelope for the community member to enclose Form D. Have them sign on the back flap after he/she has sealed it, so that the information may be kept confidential.
5. **Answers to the Essay Questions:** In your own words and handwriting, please answer the following questions on the forms that are enclosed (Please use a pen).
 - a. **Essay 1:** Why do you want to meet students from other countries and what information do you want to share with them about you and your country?
 - b. **Essay 2:** If you could invent anything, what would it be? Who would use it? Why would you develop it?
 - c. **Essay 3:** Describe how science and technology affect the world in which we live.
 - d. **Essay 4: (OPTIONAL)** – Why should you receive a scholarship for The Earth We Share™ International Science Camp?

Include a copy of your parent/guardian's IRS Form 1060 if you want to be considered for a scholarship. This information will be treated as confidential and will not be shared with any other organizations.

6. **Please include a recent photograph of yourself with your application.**
7. **Sufficient Postage:** Please put all of the above information in a large envelope with sufficient postage, and return it to THE EARTH WE SHARE™ International Science Camp.
See TEWS 2004 attachment for date and deadlines.

Incomplete applications will not be considered. It is your responsibility to ensure that your application is complete.

Please Note: All of the courses will be taught in English, therefore all selected students must be fluent in English or have studied English for at least four years if it is not your native language.

Should you have any questions and/or concerns, please do not hesitate to call.

Sincerely,

Dr. Mae C. Jemison

THE EARTH WE SHARE™
The 6th International Science Camp
"Creating a World of Science Experiences"

Form A:

Name _____
Last First Middle

Home address _____

City/State/Zip Code _____ Country _____

Home phone(_____) _____
Area/Country Code

School name _____

School address _____

City/State/Zip Code _____ Country _____

School phone(_____) _____
Area/Country Code

Age at the start of Camp _____ Grade entering at the Fall Term _____

Parent/Guardian Name(s) _____

Address we should use to contact you in May and June (*if different from above*):

List the science courses you have taken during the last three years of school and the grades you received in these courses.

List any non-science related activities you have been involved with in school.

List any specific projects or science fairs in which you have participated.

Describe any hobbies / interests you may have.

Describe any social and cultural interests you have.

Tell us what you plan to do when you finish high school.

Race and National Origin *(Mark only one box; however, disclosure of this information is voluntary)*

- African American Asian American Hispanic
- Native American White, not of Hispanic origin Other _____

You are a citizen of what country? What type of passport do you hold?

Applicant,

Your signature on the line below indicates that you completed this application on your own, without any help from other people.

Signature of Applicant _____ Date _____

Parents/Guardian,

Your signature on the line below indicates that you are supportive of your child's application to *The Earth We Share*[™] International Science Camp and that your child has your permission to attend if he/she is accepted.

Signature of Parent/Guardian _____ Date _____

Form B: School Recommendation



THE EARTH WE SHARE™
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Houston TX, 77289

Please enclose a transcript.

This should be completed by the principal or guidance counselor at the applicant's present school and returned to the applicant along with a current transcript. The applicant should provide a small envelope for the counselor or principal to enclose this form and a copy of a current transcript. The envelope should be sealed and signed across the flap to ensure confidentiality and returned to the applicant.

(PLEASE PRINT)

_____ has been a
student at _____
Name of School

since _____ and will graduate _____

Is this candidate in good standing? _____

Is this candidate in "home school": _____ Yes _____ No

If home school is applicable, please send credentials the address listed below.

THE EARTH WE SHARE™ International Science Camp is geared for students who: possess an interest in the sciences and may or may not intend to pursue careers in the sciences; have the academic skills and have demonstrated the potential to be influential and are socially well rounded; are able to effectively share their culture with others and take the insight gained with fellow students to their respective communities when they return home. The science camp will be experiential and the focus is on the interdisciplinary nature of science and technology with society, economics, the environment, politics and culture. Students will work in small groups with teachers and will also do independent work.

Your candid evaluation of this candidate's attitude and promise of success in this kind of program is greatly appreciated.

Please use the space below to comment.

Form B: School Recommendation (continued)

Applicant's Name: _____

Please consider the applicant in relation to others in her/his age group, then check the appropriate box for each item below. A written statement describing the applicant may be substituted. Listed below is a rating scale of definitions to assist you in making your assessment.

- | | | | |
|----------------|--|------------|---|
| Outstanding: | Students' work is exceptional and among the top 5% of students with whom you've interacted. | Excellent: | Students' work is consistently above average and among the top 25% of students with whom you've interacted. |
| Good: | Students' work is consistently satisfactory and among the top 50% of students with whom you've interacted. | Fair: | Students' work is generally average. |
| Below Avg.: | Students' work is rarely average. | Poor: | Students' work is below average. |
| Ins. Evidence: | Interactions with the student are limited and can not be assessed in this area. | | |

	Outstanding	Excellent	Good	Fair	Below Average	Poor	Insufficient Evidence
Oral Expression							
Initiative							
Curiosity							
Creativity							
Common Sense							
Seriousness of purpose							
Reaction to Criticism							
Self -Discipline							
Independence							
Warmth of personality							
Concern for Others							
Conduct							
Integrity							
Depend-ability							
Emotional Stability							
Energy							
Overall Rating:							
as a student							
as a person							

How long have you known the applicant and in what relationship?

Your address _____

Telephone Number (_____) _____

Signature _____

Thank you for completing this form. Please enclose it in the envelope that you will seal and sign across the back flap to ensure confidentiality. The student will mail the envelope.

Form C: Teacher Recommendation



THE EARTH WE SHARE™
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Houston TX, 77289

To be completed by a current teacher at the applicant's present school. The applicant should provide a small envelope for the teacher to enclose this form, seal and sign across the back flap to ensure confidentiality. The envelope should then be returned to the applicant to accompany their application.

Please **Print** Applicant's Name:

Last	First	Middle
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Please **Print** Teacher's Name:

Last	First	Middle
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Is this candidate in "home school": _____ Yes _____ No
If home school is applicable, please send credentials directly to the address listed below.

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Your candid evaluation of this candidate's attitude and promise of success in this kind of program is greatly appreciated.

Please use the space below to comment.

Form C: Teacher Recommendation (continued)

Applicant's Name: _____

Please consider the applicant in relation to others in her/his age group, then check the appropriate box for each item below. A written statement describing the applicant may be substituted. Listed below is a rating scale of definitions to assist you in making your assessment.

- | | | | |
|----------------|--|------------|---|
| Outstanding: | Students' work is exceptional and among the top 5% of students with whom you've interacted. | Excellent: | Students' work is consistently above average and among the top 25% of students with whom you've interacted. |
| Good: | Students' work is consistently satisfactory and among the top 50% of students with whom you've interacted. | Fair: | Students' work is generally average. |
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Self -Discipline							
Independence							
Warmth of personality							
Concern for Others							
Conduct							
Integrity							
Depend-ability							
Emotional Stability							
Energy							
Overall Rating:							
as a student							
as a person							

How long have you known the applicant and in what relationship?

Your address _____

Telephone Number (_____) _____

Signature _____

Thank you for completing this form. Please enclose it in the envelope that you will seal and sign across the back flap to ensure confidentiality. The student will mail the envelope.

Form D: Community Member Recommendation



THE EARTH WE SHARE™
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Houston TX, 77289

To be filled out by a member of the applicant's community. The applicant should provide a small envelope for the community member to enclose this form, seal and sign across the back flap to ensure confidentiality. The envelope should then be returned to the applicant to accompany their application.

Please **Print** Applicant's Name:

Last First Middle

Please **Print** Community Member's Name:

Last First Middle

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Your candid evaluation of this candidate's attitude and promise of success in this kind of program is greatly appreciated.

Please use the space below to comment.

Form D: Community Member Recommendation *(continued)*

Applicant's Name: _____

Please consider the applicant in relation to others in her/his age group, then check the appropriate box for each item below. A written statement describing the applicant may be substituted. Listed below is a rating scale of definitions to assist you in making your assessment.

- | | | | |
|----------------|--|------------|---|
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Seriousness of purpose							
Reaction to Criticism							
Self -Discipline							
Independence							
Warmth of personality							
Concern for Others							
Conduct							
Integrity							
Depend-ability							
Emotional Stability							
Energy							
Overall Rating:							
as a student							
as a person							

How long have you known the applicant and in what relationship?

Your address _____

Telephone Number (_____) _____

Signature _____

Thank you for completing this form. Please enclose it in the envelope that you will seal and sign across the back flap to ensure confidentiality. The student will mail the envelope.

