

Choctaw Nation - Project Pehlichi WILL

2024 High School Summer STEAM Camp- Jones Academy

(Science, Technology, Engineering, Arts, and Mathematics)

May 28th – June 2nd, 2024

Please submit the following items with your completed application by April 1, 2024 to steamcamp@choctawnation.com or mail to:

STUDENT APPLICATION

- 1. I plan to pursue college/university when I finish high school. Yes □ No □ Not Sure □
- 2. I plan to enroll in a vocational/technology program when I finish high school. Yes □ No □ Not Sure □

Math and Science courses enrolled in or planning to enroll in for 2024-25 academic year

3. My parents/guardians encourage me to attend college or a vocational/technical school after graduation.

Yes □ No □ Not Sure □

- 4. I have a specific career goal. Yes □ No □ Not Sure □
- 5. I am interested in a career in science, technology, engineering, arts and/or mathematics. Yes □ No □ Not Sure □

TO BE READ AND SIGNED BY STUDENT

If selected to participate in the Choctaw Nation Summer STEAM Camp, I agree to the following:

- To attend all sessions of the camp.
- To conduct myself in a way to bring credit to myself, my family, my community, my school, and the Choctaw Nation Summer STEAM Camp.
- To abide by the rules and regulations set forth in the Choctaw Nation Summer STEAM Camp Handbook for the entire length of time that I am a participant of the program.

I understand the goal of the Choctaw Nation Summer STEAM Camp is to increase my exposure to and skills in science, technology, engineering, art, and mathematics in order to help me to successfully transition to postsecondary education.

TO BE READ AND SIGNED BY PARENT/GUARDIAN

I certify that the information I have given on this application is correct. If my child is accepted as a participant, I give my permission to attend all activities of the program. I give my permission for the Choctaw Nation Summer STEAM Camp staff to have access to all educational records necessary for participation in the STEAM Camp, including but not limited to, high school transcripts, achievement test scores, and attendance/behavioral records.

to, nigh school transcripts, achievement test scores, and attendance/behavioral records.							
Student Signature	Date	Parent Signature	Date				

Counselor Recommendation

This page is to be completed by the School Counselor. Counselor, please return this form by **April 1, 2024** to: steamcamp@choctawnation.com

Choctaw Nation/Project Pehlichi WILL Summer STEAM Camp

Or mail to:

Jones Academy 909 Jones Academy Road Hartshorne, OK 74547 School Grade Student's Name Please answer all questions according to your evaluation of the student's present situation. Your evaluation will be kept strictly confidential and will be used only by the STEAM Camp staff to make selections for participation. Check the box that represents the most appropriate response for the student. Integrity and character Excellent Above Average Average Below Average Poor **Emotional maturity** Excellent Above Average □ Average Below Average Poor Cooperation with others Excellent Above Average □ Average Below Average □ Poor What is this student's potential in the fields of science, technology, engineering, and/or mathematics? Excellent Above Average □ Average Below Average Poor What is this student's potential or desire to continue his/her education beyond high school? Excellent Above Average □ Average Below Average □ Poor What is your overall recommendation? Enthusiastic with no reservations With reservations □ I do not recommend this student for participation in the Choctaw Nation Summer STEAM Camp Please use the space below for any comments that may be helpful to the STEAM Camp staff in selecting participants. Counselor Contact Info: Phone Email Name (Please Print)

Date

Teacher Recommendation

This page is to be completed by a Science, Technology, Arts, or Math Teacher. Teacher, please complete this form by April 1, 2024 and return to: steamcamp@choctawnation.com Or mail to: Choctaw Nation/Project Pehlichi WILL Summer STEAM Camp Jones Academy 909 Jones Academy Road Hartshorne, OK 74547 School Student's Name Grade Please answer all questions according to your evaluation of the student's present situation. Your evaluation will be kept strictly confidential and will be used only by the STEAM Camp staff to make selections for participation. Subject(s) do/did you teach this student How would you rank the student's interest in academic work? Excellent

Above Average Average □ Below Average □ Poor Please rank the quality of the student's participation in your class Excellent

Above Average Average □ Below Average □ Poor Indicate your opinion of the student's academic abilities Average □ Excellent Above Average Below Average Poor How would you rate the student's regard to authority? Excellent Above Average □ Average Below Average □ Poor What is this student's potential in the fields of science, technology, engineering, and/or mathematics? Excellent Above Average Average Below Average Poor What is this student's potential or desire to continue his/her education beyond high school? Excellent

Above Average Below Average □ Average Poor What is your overall recommendation? Enthusiastic with no reservations With reservations □ I do not recommend this student for participation in the Summer STEAM Camp Please use the space below for any comments that may be helpful to the Choctaw Nation STEAM Camp staff in selecting participants. Teacher Contact Info: Phone Email Name (Please Print)

Date ____

Signature _____

Personal Letter of Recommendation

Please submit a personal letter of recommendation on your behalf by a <u>non-family reference</u> attesting to how they know you, how long they have known you, and your character.

Applications will not be reviewed or considered for participation without a letter of recommendation.

To the STEAM Camp Application Review Committee,							
Sincerely,							

_Date____

Phone Email

Contact Info:
Name___

(Please Print)