

Student Information

Name: Last First Middle

Social Security #: (Required by DOE) Student School ID #:

Date of Birth: Age: Gender: Male Female

Home Address: Street Apt. # City State Zip Code

Email address:

Ethnicity: Black Hispanic/Latino Asian White Am. Indian Other: (Specify)

Are you a US citizen? Yes No (If not, do you have a green card? Yes, #: )

What language(s), other than English, is spoken in your home?

Education

School Name: City where school is located:

What grade level will you be entering in September 2014? Expected graduation date:

Current HS Cumulative GPA: Current Class Rank

Guidance Counselor's Name: Phone Number:

Do you want to go to college? Yes No If yes, what is your career goal?

Parent Information

Please indicate Parent/Guardian(s) you live with:

Mother's Name: Father's Name:

Do you live with: Both Parents Mother Only Father Only Guardian:

If you live with a guardian, please state relationship & name (i.e., Aunt, etc.):

Home Phone #: Alternate or Cell Phone #:

Marital Status of Parent/Guardian: Single Married Separated Divorced Widowed

Mother's level of education completed: Elementary School High School AD/AS BA/BS Grad School

Father's level of education completed: Elementary School High School AD/AS's BA/BS Grad School

Number of people in household: Family Yearly Income Average: \$

Is your child currently eligible for free or reduced lunch at school? Yes No

In case of an emergency, contact:

Name Relationship to Student Emergency Contact Phone #s: (1) Home (2) Cell

Other

**SHIRT SIZE:**

What t-shirt size do you wear?

- Small                       Medium                       Large  
 X-Large                       XX-Large                       XXX-Large

**FOOD:**

- Are you a vegetarian?                       Yes                       No  
 Do you have a special food requirement?                       Yes                       No  
 Will you be fasting during the program?                       Yes                       No

*If yes, will you need special accommodations? Please Specify: \_\_\_\_\_*

\*Note 1: If you require Kosher or Hallal meals, you must check "Yes" for vegetarian.

\*\*Note 2: If you check "No" for vegetarian, you may not opt for the vegetarian meals if the meal is not to your liking.

Certification

*(Please Check Boxes Below)*

- I certify that this information is true and correct to the best of my knowledge. I understand that this application is being made in connection with the receipt of Federal and State funds, and that Organization Officials may verify this information.  
 I approve and authorize my child's application for the Rutgers-Newark Aim High Academy.

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PARENT/GUARDIAN SIGNATURE

-----  
DATE

-----  
STUDENT SIGNATURE

-----  
DATE

**Only completed applications will be considered for admission into Aim High Academy.**

**Please include the following information with your application:**

- A short essay of at least 125 words explaining; **"Why you are interested in becoming a participant in the Aim High Academy: Summer Earth Ecology Program?"**
- A recommendation form from a teacher or guidance counselor
- Attach student's most recent report card/transcript
- Attach copy of income verification (i.e. federal tax forms, a pay stub, award letter from the welfare, unemployment, or social security office, or other, if applicable)
- Completed Parental Consent Form
- Completed Transcript and Report Card Release Form

**Mail, fax or return completed application to office address below:**

Aim High Academy: Summer Earth Ecology Program  
 Rutgers University-Newark  
 Academic Foundations Center  
 Att: Mariana Morales  
 110 Warren Street, Bradley Hall 1\* Floor/Room 125  
 Newark, New Jersey 07102  
 Telephone: (973) 353-3568 Fax: (973) 353-5700  
 For questions or more copies of the applications go to:  
<http://www.ncas.rutgers.edu/afc/aha>  
 or email us at:  
[aimhigh@rutgers.edu](mailto:aimhigh@rutgers.edu)  
[mariana.morales@rutgers.edu](mailto:mariana.morales@rutgers.edu)

**Deadline for submission is Friday, May 9<sup>th</sup>, 2014**

Aim High Academy is sponsored by the New Jersey Department of Education and Rutgers University-Newark. There is no charge to participate for students or their families.

**Student Recommendation Form**

Applicant's Name: \_\_\_\_\_  
Last
First
Middle

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (Required by DOE) Student School ID #: \_\_\_\_\_

Recommender's Name: \_\_\_\_\_  
Last
First
Middle

Occupation: \_\_\_\_\_ Relationship to the Applicant: \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_ How well do you know the applicant? \_\_\_\_\_

In what capacity do have you known the applicant? \_\_\_\_\_

Areas	Excellent	Good	Fair	Poor
Intellectual				
Initiative				
Creativity				
Leadership				
Dependability				
Interpersonal Relations				
Diligence				
Team Work				

Additional comments:

\_\_\_\_\_  
RECOMMENDER SIGNATURE

\_\_\_\_\_  
DATE

Once your recommendation is completed you can either fax or mail it to:  
**Aim High Academy: Summer Earth Ecology Program**  
**Rutgers University-Newark**  
**Academic Foundations Center**  
 Att: Mariana Morales  
 110 Warren Street, Bradley Hall 1\* Floor/Room 125  
 Newark, New Jersey 07102  
 Telephone: (973) 353-3568 Fax: (973) 353-5700

**Aim High Academy: Summer Earth Ecology Program  
Program Parental Consent Form**

Name \_\_\_\_\_

SS# \_\_\_\_\_

The Rutgers University-Newark Aim High Academy requires that all students submit a signed permission slip by a parent or guardian in order to participate in all program sponsored activities and field trips.

I hereby voluntarily grant permission for my son/daughter, \_\_\_\_\_, to participate in the Rutgers-Newark three-week residential Aim High Academy and do waive, release, and discharge Rutgers, The State University of New Jersey, its governors, trustees, officers, employees, and agents from and against all claims for bodily injury, death or property damage, arising in any manner out of the presence or activity of the participant in connection with this program.

- I give permission for my son or daughter to participate in the Aim High Academy.
- I do not give permission for my son or daughter to participate in the Aim High Academy.

Full Name of Parent/Guardian \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**MEDICAL RELEASE**

Student's Physician Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

History of significant health problems:

Allergies to medications or foods:

Does the student carry an epi pen?  Yes  No

List any medications student will be taking:

**Aim High Academy: Summer Earth Ecology Program  
Transcript and Report Card Release Form**

As a requirement of participation in the Aim High Academy grant program, we must receive a record of your final grades. Please complete and sign this form. If possible, please also include your School ID (or Social Security Number).  
**Transcripts may be unofficial.**

I hereby grant permission for my school to release my transcript/report card to Aim High Academy grant program to Rutgers University-Newark for the purposes of program evaluation. *Please PRINT in ink!*

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
(Please Print)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Birth Date \_\_\_\_\_ Graduation Date ( \_\_\_\_\_ )  
(High School Only)

Name of School \_\_\_\_\_ School City \_\_\_\_\_

Grade \_\_\_\_\_ School ID \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date ( \_\_\_\_\_ )

Parent's Signature \_\_\_\_\_ Date ( \_\_\_\_\_ )  
(If student is not yet 18 years old)

**FOR OFFICE USE ONLY**

Forms Completed: <input type="checkbox"/> Parental Consent Form <input type="checkbox"/> Transcript Release <input type="checkbox"/> Behavior Agreement	Accepted: <input type="checkbox"/> Yes <input type="checkbox"/> No Denied: <input type="checkbox"/> Yes <input type="checkbox"/> No Waiting List: <input type="checkbox"/> Yes <input type="checkbox"/> No
Folder Completed: <input type="checkbox"/> Yes, <input type="checkbox"/> No	
Comments:  	
Completed by: _____ Date: _____	