

Student Application Form
Wyoming Astro Camp 2009

Complete and sign this application. Consent and signature of your parent or guardian is required.

Name _____ Nickname, if any _____

Phone _____ Age ____ Birthdate (m/d/yy) _____ Current Grade Level ____

Street Address _____ City _____ State ____ Zipcode _____

School Currently Attending _____ School District _____

The following information is requested to insure equal opportunity Sex ____ Race _____

Have you been to Astrocamp before? If yes, when? _____

Name of Parent(s) or Legal Guardian(s) _____

Address of Parent(s) or Legal Guardian(s) _____

Student Applicant Signature _____

Parent or Guardian's Signature _____

List activities you are involved in at school or in the community:

List of awards or honors:

1. Attach a 1-page letter of application describing the reasons you want to participate in Astro Camp and what you hope to gain from the experience.
2. Attach a 1-page essay describing a project or activity (over and above your regular school work) which best describes you as an individual, OR a personal experience that has made a deep impact on you.
3. Have two letters of recommendation sent to us directly using the Recommendation Form provided. One must be from a current teacher. The other may be a teacher, counselor, youth group leader, or other person who knows you well.
4. Include a transcript showing grades from your current school for the last year.

Return this form and the above materials by April 15, 2009 to
Wyoming Astro Camp
Department of Physics & Astronomy
1000 E. University
Laramie, WY 82070

Admitted students will be notified around May 10, 2009.