Jacksonville State University's
21st Century Community Learning Summer Camp
July 13 - 18, 2008

Registration Form

Pre-registration is required. All registration forms must be received by June 23, 2008.

Student Section:

Name: _____

Address: _____

_____

City State Zip Code

Phone (home): _____Cell: _____

Email: _____

School: _____

Age: _____ Male Female

Emergency phone #: _____

Parent/Guardian Section:

Name: _____

Address: _____

_____

City State Zip Code

Phone: _____

Email: _____

I give my permission for my child to attend summer camp at Jacksonville State University and agree to transport him/her to and from the campus.

_____

(Parent's signature required)

I give permission to the Truman Pierce Institute and the Jacksonville State University College of Education to use or reproduce my child's photograph for promotion of programs, including public relations, and educational purposes.

_____

(Parent's signature)

Service Agreement of Student:

I, _____, agree to serve as a tutor in the after-school program at _____ school in the (city/county) _____ school system. I agree to complete at least 40 hours of service during the 2008-09 school year.

_____

Student's signature (required)

_____

Principal's/Teacher's or Counselor's signature (required)

Interest Statement

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Briefly describe in your own words (100 or less) why you should be selected to participate in this innovative summer camp experience at Jacksonville State University.

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

***A letter of recommendation from a teacher, principal or school official detailing the student's academic strength, community/school involvement, character, and ability to be a leader must accompany this registration form.**

****At least 50% of participants in these summer camps are to be from low-income homes and/or communities. Please indicate if you meet these criteria. This information will remain confidential and will only be used for selection of participants and in summary reports.**

Low-income home **Low-income community**

Please send completed forms to Dr. Linda Mitchell by June 23, 2008 to:

Mail to:
Dr. Linda Mitchell
Department of Secondary Education
Jacksonville State University
700 Pelham Road
Jacksonville, AL 36365-1602

Email to:
lmitchell@jsu.edu

Fax to:
256-782-8308

If you have any questions please contact Dr. Mitchell by phone or email:
Email: lmitchell@jsu.edu or Phone: (256) 782-5181

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