

PHYSICS SUMMER CAMP

Application for Summer 2018

Applications must be postmarked by **March 30, 2018**.

A complete application should include two recommendation letters from teachers using the enclosed forms, one from a mathematics teacher and one from a science teacher, sent directly to the address below. In addition, please submit a copy of your high school transcript AND your most recent report card.

Acceptance to the program is competitive and limited to 20 students. Applicants will be selected based on all three components of the application (letters of recommendation, essays, and grades).

Limited number of full and/or partial scholarships are available to applicants who are eligible for the Federal free or reduced lunch program. Please submit a letter, on letterhead, from an official at the school district **or** the letter you received stating that you are eligible for the free or reduced lunch program.

- Introducing Physics: July 9 – July 13
 Advanced Physics: July 16 – July 20

Your Name

last

first

middle

Mailing Address

Street

city

state

zip

Gender

Phone #

Career Goal

High School

Year of Graduation

Date of Birth

Tee-shirt size

Email address

Parent email address

Information on your letters of recommendation (to be sent directly from teacher):

Name of mathematics teacher:

Name of science teacher:

Postmark Applications by **March 30, 2018**:

Institute for STEM Education

092 Life Sciences Building

Stony Brook University

Stony Brook, NY 11794-5233

Tel: 631-632-9750; Fax: 631-632-9791

PHYSICS SUMMER CAMP

Your Name _____

last

first

middle

Answers to each question should be shorter than 50 words.

Essay Questions

1. Discuss a technical event or experience that has caused you to have an interest in Physics or science.
2. What do you expect to get out of the Physics Summer Camp experience at the Institute for STEM Education at Stony Brook University?
3. Does any specific attribute, quality or skill distinguish you from everyone else? How did you develop this attribute or skill?
4. What are the most important extracurricular and/or community activities that you are involved with? What made you choose such activities?

Institute for STEM Education



STONY BROOK UNIVERSITY

PHYSICS SUMMER CAMP

Mathematics Teacher Recommendation Form

(To be completed by a mathematics teacher who has taught you.)

Student's Name _____

Teacher's Name _____ School _____

Capacity in which you know this student _____

Please compare this student to the others that you have taught:

	Top 2%	Top 10%	Top 25%	Top 50%	Less than 50%
Maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Positive interaction with peers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inquisitiveness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to complete tasks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Student's strengths:

Student's weaknesses:

Additional comments:

Teacher's signature _____ Date _____

Deadline:03/30/18

Please send to: Institute for STEM Education, 092 Life
Sciences Building, Stony Brook University,
Stony Brook, NY 11794-5233
(tel: 631-632-9750; fax: 631-632-9791)

PHYSICS SUMMER CAMP

Science Teacher Recommendation Form

(To be completed by a science teacher who has taught you.)

Student's Name _____

Teacher's Name _____ School _____

Capacity in which you know this student _____

Please compare this student to the others that you have taught:

	Top 2%	Top 10%	Top 25%	Top 50%	Less than 50%
Maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Positive interaction with peers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inquisitiveness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to complete tasks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Student's strengths:

Student's weaknesses:

Additional comments:

Teacher's signature _____ Date _____

Deadline: 03/30/18

Please send to: Institute for STEM Education, 092 Life Science
Building, Stony Brook University,
Stony Brook, NY 11794-5233
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