

# ANTIOCH SUMMER HONORS INSTITUTE

## Student Application Information

Name: \_\_\_\_\_

Gender: M \_\_\_\_ F \_\_\_\_ Grade entering this Fall: 10<sup>th</sup> \_\_\_\_ 11<sup>th</sup> \_\_\_\_

Address: \_\_\_\_\_

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

County: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Parent/Guardian Information

Parent/Guardian Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

## School Information

Name of School: \_\_\_\_\_ School District: \_\_\_\_\_

Address: \_\_\_\_\_

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

Name of Counselor or Gifted Teacher Coordinator: \_\_\_\_\_

Position: \_\_\_\_\_ Phone: \_\_\_\_\_

## Other

. Ethnicity (optional): \_\_\_\_\_

. How did you find out about us (please check one)?

Teacher/Counselor: \_\_\_\_\_ ODE Website: \_\_\_\_\_ Antioch Website: \_\_\_\_\_

Glen Helen Website: \_\_\_\_\_ Other: \_\_\_\_\_

. Will you be applying for Residential Financial Aid? Yes \_\_\_\_ No \_\_\_\_

## Parental Consent

I, the parent/guardian of \_\_\_\_\_ give permission for my son/daughter to apply to participate in the Antioch Summer Honors Institute.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian

(continued on back)

## **Student Information**

On this page please answer both of the following.

1. Briefly describe why you want to participate and what you hope to gain from attending this environmental studies program.
2. Please identify a topic within the subject area of environmental studies that you would be interested in learning more about, and describe how you would ideally like to increase your understanding of the topic.