



## ICE Summer Enrichment Program 2012

Dear Parent,

Thank you for your interest in enrolling your child in the 2012 ICE Summer Enrichment Program. You may have noticed that the procedure for applying to the program has changed and you should read through this letter completely before proceeding with the process. You must submit all components of the application in order to be considered for any program. We hope you find our new process to be easier and more convenient.

### **Application Process**

#### **Step 1**

Please fill out the parent/guardian and student information at the following site:

[http://www.surveymonkey.com/s/Summer\\_Camps2012](http://www.surveymonkey.com/s/Summer_Camps2012).

#### **Step 2**

The Application Packet is step two in a four step process. This step requires you to complete the following pages (located in this packet):

- Page 2 – Student Expectation Contract
- Page 3 – Program Application and Fees
- Page 4 – Teacher Recommendation Form (to be completed by a teacher)
- Page 5 – Medical Release Form
- Page 6 and 7 – Parental Release Form
- Page 8 – Financial Assistance Form (optional)
- Page 9 – Extended Hours Registration Form (optional)

#### **Step 3**

Obtain and submit a current grade report. High school program applicants should submit an unofficial transcript and a copy of PSAT or SAT scores, these items can be obtained from your guidance office. For rising 4<sup>th</sup>-9<sup>th</sup> grade applicants, a grade report indicating grades obtained during the fall of 2011 needs to be provided.

#### **Step 4**

Send the completed paperwork and application fees to:

ICE Programs  
ATTN: Stephanie Echols  
810 Atlantic Drive  
Atlanta, GA 30332

### **Application Deadline: Postmarked by May 14**

If you have any questions about the application process, please contact us at [gatech.ice@gmail.com](mailto:gatech.ice@gmail.com). We look forward to reviewing your application and hope to see you this summer.

Sincerely,  
ICE Student Program Staff



## Student Expectation Contract

Student's Name \_\_\_\_\_

Georgia Tech has high expectations for all students. The following expectations are designed to promote the well-being of each student and to insure that each child is able to reach his/her fullest potential. Each student will be expected to do the following:

1. Respect the property and feelings of fellow summer program students, teachers and student assistants as well as all others not directly associated with summer programs (bus drivers, dining hall staff, etc.). Always act in a manner that will promote a classmate's opportunity to learn. Have a positive attitude about learning and involvement during the summer program.
2. Politely communicate any concerns directly to summer program teachers or student assistants. No "horseplay" of any kind will be tolerated. Students are representatives of Georgia Tech during their involvement with the summer camp programs.
3. No drugs or tobacco are permitted on Georgia Tech campus by summer program participants. If your child requires prescribed medications, please include a note that indicates the name of the medication, proper dosage, and time the dosage is administered. Medication must be in the correct prescription container.
4. No weapons of any kind are permitted on the Georgia Tech campus. This includes guns, knives, switchblades, pocketknives, and any other instruments that could be used as weapons. Any student who brings a weapon to a summer program will be handed over to the campus police and immediately dismissed from the program.

A student who violates any of these rules will be dismissed from all summer programs.

By signing this page, I acknowledge that my child and I understand the expectations for participation in the ICE Summer Program and that any violation of these expectations will result in the immediate dismissal from the summer program. If my child is dismissed from a program, I understand that they are then deemed ineligible for any future ICE programs.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date



## Program Application and Fees

Student's Name: \_\_\_\_\_

The above student is applying for the following weeks of camp:

- May 29 – June 1, 2012** – Middle School (rising 6-8<sup>th</sup>) – Movies and Movement with Alice and LEGO NXT **Cost: \$228**
- June 4-8, 2012** – Elementary School (rising 4th-6th) - Art and Movement with WeDo and Scratch **Cost: \$285**
- June 11-15, 2012** - High School (rising 9th-12th) - Mobile Apps with App Inventor **Cost: \$185**
- June 18-22, 2012** - Elementary School (rising 4th-6th) - Visual Art and Simulations with LEGO NXT and Scratch **Cost: \$285**
- June 25-29, 2012** - Middle School (rising 6th-8th) - Music and Dancing with PicoCrickets and Scratch **Cost: \$285**
- July 9-13, 2012** - High School (rising 9th-12th) Creating Music with EarSketch **Cost: \$185**
- July 16-20, 2012** - Elementary School (rising 4th - 6th) - Music and Dancing with LEGO NXT and Scratch **Cost: \$285**
- July 23-27, 2012** – Elementary School (rising 4th - 6th) - Artificial Life Forms with LEGO NXT and Alice **Cost: \$285**
- July 30-August 3, 2012** – High School (rising 9th - 12th) - Artificial Life Forms with Alice, LEGO NXT, and LEGO Tetrix **Cost: \$185**

### Application Fees

A non-refundable application fee of \$15 is required for each week of summer camp.

\_\_\_\_\_ X \$15 Each = \_\_\_\_\_  
Number of camps checked                      Total amount due

Please remit your non-refundable application fees (amount calculated above) by check or money order. Please make your payment to **Georgia Institute of Technology**.



## Teacher Recommendation Form

The recommendation form should be completed by a teacher.

**Student's Name:** \_\_\_\_\_

Dear Teacher,

The above-named student is applying for a summer enrichment program sponsored by the Georgia Institute for Computing Education (ICE). ICE enrichment programs are open to students who display a keen interest in art, business, math, music or science. This program is NOT exclusively for the gifted and talented. In fact, we wish to encourage all students who might benefit from the recognition and enrichment this program offers. Your comments count heavily in our selection process, so please take time to write fully and candidly about this student. For additional information about ICE summer enrichment programs, please visit our website at: <http://coweb.cc.gatech.edu/ice-gt/1844>.

When you have completed the form, place the form into a sealed envelope and return it to the student for submission. Please sign along the sealed flap.

Thank you for your time,  
ICE Program Staff

Please check the appropriate boxes in the grid provided. You may use the back of this form to write any comments. If you have checked any box "below average", please explain. Thank you for your help in evaluating this student.

	<b>Excellent</b>	<b>Good</b>	<b>Average</b>	<b>Below Average</b>
Works well with others				
Respects authority				
Adapts easily to new surroundings				
Has positive attitude towards school				
Art achievement				
Business achievement				
Mathematics achievement				
Music achievement				
Science achievement				
Handles conflicts appropriately				
Accepts responsibility for behavior				
Follows written and oral directions				
Seeks new challenges				

**Subject Taught** \_\_\_\_\_

**Teacher's Name** \_\_\_\_\_ **Grade Taught** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



## Medical Release and Emergency Contact

### Student Information

Student's Name: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: M F

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

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

### Emergency Notification

Mother: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Preferred Emergency Contact Daytime Phone /Cell: \_\_\_\_\_

Father: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Preferred Emergency Contact Daytime Phone /Cell: \_\_\_\_\_

Legal Guardian: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Preferred Emergency Contact Daytime Phone /Cell: \_\_\_\_\_

### Insurance Provider's Information

**NOTE: PARTICIPANT MUST HAVE MEDICAL INSURANCE**

Provider's Name: \_\_\_\_\_ Provider's Phone No.: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Insurer's Name: \_\_\_\_\_

### Medical Information

Primary Care Physician: \_\_\_\_\_ Physician's Phone: \_\_\_\_\_

Special Medical Condition(s): \_\_\_\_\_

Drug Allergies: \_\_\_\_\_

Current Medications & Dosages: \_\_\_\_\_

Special Dietary Needs or Food Allergies: \_\_\_\_\_

### Authorization For Medical Treatment

**(The completed form must be on file before treatment is administered.)**

I give my permission for such diagnostic, therapeutic, and operative procedures as may be deemed necessary for my son / daughter / ward.

Parent or Legal Guardian's signature is REQUIRED below if the student is less than eighteen years of age.

\_\_\_\_\_  
Signature of Participant Date

\_\_\_\_\_  
Signature of Parent or Legal Guardian Date



## PARENTAL REQUEST TO PARTICIPATE AND RELEASE AGREEMENT

Student/Participant Name: \_\_\_\_\_

I am the parent or legal guardian of the above named Student/Participant and am requesting that my child enroll or participate in the following course, program, project, event, or activity (herein collectively referred to as "Activity") being sponsored by or located on the campus of the Georgia Institute of Technology:

Name of Activity: \_\_\_\_\_

Date of Activity: \_\_\_\_\_

In consideration of permission being granted for my child to participate in this Activity and for other valuable consideration, the receipt and sufficiency of which are acknowledged, I am entering into this Release Agreement, which extends to the following persons and entities, as well as their trustees, directors, board members, agents, employees, volunteers, contractors, representatives, successors, or assigns, individually and in any capacity or relationship with or for any other.

Board of Regents of the University System of Georgia  
Georgia Institute of Technology  
Georgia Tech Student Government Association  
Georgia Tech Research Corporation

My child's enrollment or participation will or could subject my child to numerous dangers or risks of personal injury, even fatal, as well as other injuries or damages. I have explained these risks to my child. These risks and dangers have been considered and, relying on my own judgment, I voluntarily have chosen to allow my child to participate and assume all such dangers and risks. I certify that my child is in suitable health and capacity which allows my child's enrollment or participation in the Activity.

I knowingly, voluntarily, and for adequate consideration release and waive, and further agree to indemnify, hold harmless, and reimburse each and all of those persons and entities referenced above, from an against any claim which I, my child, any other parent, any relative or any next of kin of my child, or any other person, firm or corporation now or hereafter may have or claim to have (whether known or unknown, seen or unforeseen, directly or indirectly, or within or without the control of those persons and entities), for or on account of any losses, damages, personal injuries, pain and suffering, death, property damage, or contact claims resulting from, or arising out of, during, or in connection with my child's enrollment or participation in such activity, or the ownership, operations, use, maintenance, or control of any vehicle, equipment or goods provided or used in connection with such activity, or in any way connected with or arising out of instruction, training, emergency care, or operations incidental to such activity. To the extent that any damages arising out of bodily injury to persons or damage to property are caused or result from the sole negligence of any person or entity referenced above, then, I do not agree to release, waive, indemnify, hold harmless or reimburse any such person or entity.



If any emergency medical procedures or treatment are required during the Activity, I consent to the Activity supervisor undertaking, arranging for or consenting to the procedures or treatment in his, her or their discretion and that I will be responsible for any and all expenses or fees related to my child's medical care. I acknowledge that GIT shall not be liable for any such fees or expenses under any circumstances.

Further, I hereby certify that my child is covered by an accident and health insurance policy that will be in effect at anytime my child is participating in an Activity on the campus or, sponsored by, or related to the Georgia Institute of Technology.

In regard to any photographs, video tapes, motion pictures, recordings, or any other reproduction of my image or my child's image (hereinafter collectively known as "Images") which GIT had taken of me or of my child or in which I may be included with others during the course of my participation in this program, I hereby grant to the Georgia Institute of Technology permission to use such Images in any media now or hereafter known for any legitimate purpose whatsoever, and to use my name or my child's name in connection therewith if GIT so chooses.

This Release Agreement shall be construed to be as comprehensive as is allowed by law. Each provision herein is severable, so that should any provision or portion of such provision be held invalid, the remainder of this Release Agreement shall not affect the enforceability of any other portion. This Release Agreement shall not establish a legal or other relationship between or among those released which does not in fact exist. Nothing in this Release Agreement shall constitute a waiver of any legal defense available to any released party herein, including sovereign immunity.

The validity, interpretation, and effect of the Release Agreement shall be governed by the laws of the State of Georgia.

**I CERTIFY THAT I AM 18 YEARS OF AGE OR OLDER AND THAT I AM SUFFERING FROM NO LEGAL DISABILITY.**

**I HAVE READ AND UNDERSTAND THIS RELEASE AGREEMENT.**

Signature of Parent/Guardian: \_\_\_\_\_

Typed or Printed Name: \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone work \_\_\_\_\_ home \_\_\_\_\_



## Financial Assistance Form

Limited financial assistance is available for students who meet financial need requirements and who otherwise would not be able to attend. Requests for financial assistance are based on need and the availability of scholarship support. All financial information will be kept strictly confidential and applying for assistance will in no way affect the evaluation of your child's application. Please complete the Financial Assistance Form and submit it with supporting documentation with your completed Program Application Packet (PAP). Incomplete applications will not be reviewed.

### Student Information (please type or print)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

### Eligibility

To be **eligible** for financial assistance one of the following guidelines must be met:

- A. Student is on the free or reduced lunch program at school. Please provide a copy of award letter.
- B. Student lives in a family with an income of less than \$35,000 per year. Please provide a copy of 2011 tax return or W-2 form.

### Financial Assistance Request

I am requesting Financial Assistance for the following weeks of summer camp:

- May 29 – June 1, 2012** – Middle School (rising 6-8<sup>th</sup>) – Movies and Movement with Alice and LEGO NXT
- June 4-8, 2012** – Elementary School (rising 4th-6th) - Art and Movement with WeDo and Scratch
- June 11-15, 2012** - High School (rising 9th-12th) - Mobile Apps with App Inventor
- June 18-22, 2012** - Elementary School (rising 4th-6th) - Visual Art and Simulations with LEGO NXT and Scratch
- June 25-29, 2012** - Middle School (rising 6th-8th) - Music and Dancing with PicoCrickets and Scratch
- July 9-13, 2012** - High School (rising 9th-12th) Creating Music with EarSketch
- July 16-20, 2012** - Elementary School (rising 4th - 6th) - Music and Dancing with LEGO NXT and Scratch
- July 23-27, 2012** – Elementary School (rising 4th - 6th) - Artificial Life Forms with LEGO NXT and Alice
- July 30-August 3, 2012** – High School (rising 9th - 12th) - Artificial Life Forms with Alice, LEGO NXT, and LEGO Tetrix **Cost: \$185**

We meet \_\_\_ A \_\_\_ B (check one) of the guidelines above.

I am requesting \$\_\_\_\_\_ towards summer program tuition.

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

**Please attach a copy of the letter from your school cafeteria indicating free/reduced lunch status, your tax forms or other supporting documents. Financial assistance cannot be awarded without supporting documentation.**



## Extended Hours Registration Form

We are pleased to be able to offer extended after-hours care to our program participants. Extended care is offered Monday through Thursday from 3 p.m. to 6 p.m. following our ICE camps. Costs for each camp's extended hours are listed below.

**Student's Name:** \_\_\_\_\_

The above student is applying for the following weeks of camp extended hours care:

- May 29 – June 1, 2012** – Middle School (rising 6-8<sup>th</sup>) – Movies and Movement with Alice and LEGO NXT- **Extended Hours Cost: \$30**
- June 4-8, 2012** – Elementary School (rising 4th-6th) - Art and Movement with WeDo and Scratch- **Extended Hours Cost: \$40**
- June 11-15, 2012** - High School (rising 9th-12th) - Mobile Apps with App Inventor- **Extended Hours Cost: \$40**
- June 18-22, 2012** - Elementary School (rising 4th-6th) - Visual Art and Simulations with LEGO NXT and Scratch-**Extended Hours Cost: \$40**
- June 25-29, 2012** - Middle School (rising 6th-8th) - Music and Dancing with PicoCrickets and Scratch- **Extended Hours Cost: \$40**
- July 9-13, 2012** - High School (rising 9th-12th) Creating Music with EarSketch- **Extended Hours Cost: \$40**
- July 16-20, 2012** - Elementary School (rising 4th - 6th) - Music and Dancing with LEGO NXT and Scratch- **Extended Hours Cost: \$40**
- July 23-27, 2012** – Elementary School (rising 4th - 6th) - Artificial Life Forms with LEGO NXT and Alice- **Extended Hours Cost: \$40**
- July 30-August 3, 2012** – High School (rising 9th - 12th) - Artificial Life Forms with Alice, LEGO NXT, and LEGO Tetrix - **Extended Hours Cost: \$40**

You will be notified of your child's acceptance into a summer camp and after-hours care at the same time. Fees for both the summer camp and extended hour care will be due upon acceptance into the program.