ELECTRONICS SUMMER CAMP

LEARN HOW TO BUILD AND PROGRAM ELECTRONIC CIRCUITS!!!
NO PRIOR EXPERIENCE REQUIRED!

OBJECTION
Are you a middle school or high school student with a 3.0 GPA interested in learning about electronics? If so, apply to the Electronics Summer Camp at California State University, Long Beach.

• Learn electrical concepts, components, and programming
• Experience building and programming your own electronic circuits from scratch
• Learn how to program and control an electronic prosthetic hand
• Compete on projects with fellow students
• Learn vital skills for the future!!!

To apply, please visit www.csulb.edu/coe and click on the Engineering Summer Camps link under Announcements. Seats are limited so apply today! Applications are due JUNE 27, 2016!

SUMMER SESSION 1
(6th, 7th, 8th ONLY!):
TIME: M - F | 9:00 A.M. – 3:00 P.M.
PRICE: $100 | Please make checks payable to:
CSULB Research Foundation

SUMMER SESSION 2
(9th, 10th, 11th, 12th ONLY!):
DATE: JULY 18, 2016 – JULY 22, 2016
TIME: M - F | 9:00 A.M. – 3:00 P.M.
PRICE: $100 | Please make checks payable to:
CSULB Research Foundation

Any questions about the Electronics Summer Camp at CSULB may be directed to:
Brenda Medina, Program Coordinator
Brenda.Medina@csulb.edu
(562) 985-4115

Students will be working on Arduino circuit boards during the Electronics Summer Camp at California State University, Long Beach.
PLEASE SUBMIT THIS APPLICATION ALONG WITH A COPY OF YOUR MOST RECENT REPORT CARD AND A RECOMMENDATION LETTER FROM A COUNSELOR / MESA ADVISOR BY: JUNE 27, 2016.

REQUIRED FIELDS ARE NOTED WITH AN ASTERISK; INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED!!!

**STUDENT INFORMATION**

*First Name: ___________________________ Middle Initial: _______ *Last Name: ___________________________

*Birthdate (MM / DD / YYYY): ___________________________ *Gender: ☐ Male ☐ Female

*Home Address: ____________________________________________________________ *City: ___________________________ State: CA *Zip: __________

*Contact Phone: ___________________________ E-mail: ___________________________

*Ethnicity:

☐ African-American ☐ Filipino ☐ White / Caucasian

☐ American Indian ☐ Hispanic / Latino ☐ Other: ___________________________

☐ Asian ☐ Pacific Islander ☐ Decline to State / Don’t Know

**SCHOOL INFORMATION**

*School Name: ___________________________ *District Name: ___________________________

*Grade Level: ___________________________ *Academic GPA: ___________________________ *Student ID #: ___________________________

*Please specify the courses you are currently taking:

*Mathematics: ___________________________ *Grade: ___________________________

*Science: ___________________________ *Grade: ___________________________

*English: ___________________________ *Grade: ___________________________

*Primary Career Interest: ___________________________

**APPLICATION PROCESS**

*Please confirm the session you are applying for:

☐ Summer Session (Grades 6th, 7th, 8th): (July 11, 2016 – July 15, 2016)
Monday – Friday | 9:00 a.m. – 3:00 p.m.
Lunch will be provided.
Transportation: Participant must provide own transportation
Cost: $100 | Please make checks payable to: CSULB Research Foundation

☐ Summer Session 2 (Grades 9th, 10th, 11th, 12th): (July 18, 2016 – July 22, 2016)
Monday – Friday | 9:00 a.m. – 3:00 p.m.
Lunch will be provided.
Transportation: Participant must provide own transportation
Cost: $100 | Please make checks payable to: CSULB Research Foundation

*Applicant Signature: ___________________________ *Date: ___________________________

The Electronics Summer Camp application process is very rigorous. To ensure that your application is considered for participation in the camp, it is important that you submit a complete application, along with your $100 payment, made payable to the CSULB Research Foundation, by JUNE 27, 2016 to the following address:

Brenda Medina, Program Coordinator
K-12 Outreach and Recruitment, EN2-302B
College of Engineering
California State University, Long Beach
1250 Bellflower Blvd., Long Beach, CA 90840-8306
PLEASE SUBMIT THIS APPLICATION ALONG WITH A COPY OF YOUR MOST RECENT REPORT CARD AND A RECOMMENDATION LETTER FROM A COUNSELOR / MESA ADVISOR BY: JUNE 27, 2016.

Student Name: ___________________________ School: ___________________ Student ID: __________________

I, _____________________________, parent or legal guardian of the above-mentioned student, hereby give permission for my child to participate in the Electronics Summer Camp conducted by the California State University, Long Beach, Research Foundation. I understand that the primary objective of the Electronics Summer Camp is to expose students to the engineering field by learning electrical concepts, components of a micro-processor, and programming, as well as introduce students to the CSULB campus. I hereby authorize the Electronics Summer Camp faculty, staff, and their assistants to engage in the following:

1. To allow my child to engage in hands-on activity and attend field trips sponsored and coordinated by the Electronics Summer Camp. I understand that my child will have adult supervision while on these field trips.

2. To use my child's name, photograph and quotes in the Electronics Summer Camp press releases and publications.

I certify that my child is physically fit such that he/she is able to participate in the Electronics Summer Camp activities and that I have read and understand any rules and safety provision established for this camp.

In addition, I agree to assume full responsibility for any risk of injury, death, or property damage arising out of my child's participation in the camp and I give permission for my child to receive, if necessary, emergency medical services by authorized personnel, and that any cost incurred as a result of such emergency will be solely my responsibility.

I further release the University and the CSULB Research Foundation from any liability on account of injury to or death of my child arising out of my child's participation in the Electronics Summer Camp activities and hold the University/CSULB Research Foundation harmless for any damage or costs that may be incurred due to acts of my child during participation in this camp.

I understand that this consent may be withdrawn at any time by my written directions to the Electronics Summer Camp Director, Dr. Saba Yohannes-Reda.

Dr. Saba Yohannes-Reda
K-12 Outreach and Recruitment, EN2-302
College of Engineering
California State University, Long Beach
1250 Bellflower Blvd., Long Beach, CA 90840-8306

________________________________________________________
Parent or Legal Guardian’s Signature

__________________________________
Date

Nombre del Estudiante: _____________________ Escuela: ___________________ ID del Estudiante: ____________

Yo, ____________________________________________, padre o tutor del estudiante previamente mencionado(a), por la presente doy permiso para que mi hijo(a) participe en actividades del Electronics Summer Camp dirigidas por California State University, Long Beach, Research Foundation. Entiendo que el propósito principal del Electronics Summer Camp es exponer a los estudiantes a la industria de la ingeniería por aprender conceptos eléctricos, componentes de un micro-procesador, y la programación, así como presentar a los estudiantes al campus de CSULB. Por consiguiente, autorizo a la facultad, personal y asistentes del Electronics Summer Camp en lo siguiente:

1. Permitir que mi hijo(a) participe en actividades prácticas y asista a excursiones y eventos patrocinados y coordinados por el Electronics Summer Camp. Entiendo que mi hijo(a) tendrá supervisión adulta en estas excursiones.

2. Usar el nombre, imagen y citas de mi hijo(a) en comunicados de prensa y materiales relacionados con el Electronics Summer Camp.

Certifico que he leído y entiendo las reglas y provisiones de seguridad establecidas por el Electronics Summer Camp.

Además, estoy de acuerdo en asumir la responsabilidad total de cualquier riesgo de herida, muerte o daño a propiedad que resulte de la participación de mi hijo(a) en el programa y doy permiso para que mi hijo(a) reciba, si es necesario, servicios médicos de emergencia de parte de personal autorizado, y que cualquier costo que resulte de tal emergencia médica será solamente mi responsabilidad.

Por lo tanto, libero a la Universidad de California y la CSULB Research Foundation de cualquier obligación por causa de herida o muerte de mi hijo(a) que resulte de su participación en actividades del Electronics Summer Camp y mantengo sin perjuicio a la Universidad/CSULB Research Foundation de cualquier daño o costo que pueda resultar debido a las acciones de mi hijo(a) durante su participación en el programa.

Entiendo que este consentimiento puede ser retirado en cualquier momento por medio de mis instrucciones escritas al Director del Electronics Summer Camp, Dr. Saba Yohannes-Reda.

Dr. Saba Yohannes-Reda
K-12 Outreach and Recruitment, EN2-302
College of Engineering
California State University, Long Beach
1250 Bellflower Blvd., Long Beach, CA 90840-8306

__________________________________________________________  _____________________________________
Firma del Padre o Tutor Fecha