

Annual Robotics Summer Camp

Application Packet

July 2009

Camp Website:

<http://www.tcnj.edu/~summer/programs/roboticscamp.html>

Contact:

Dr. Orlando Hernandez

Electrical and Computer Engineering

The College of New Jersey

PO Box 7718

Ewing, NJ 08628-0718

Office: Armstrong Hall 159

Phone: (609) 771-2470

Fax: (609) 637-5148

E-mail: hernande@tcnj.edu

Annual Robotics Summer Camp Application, July 2009

It is very important that this APPLICATION be completed accurately and legibly. Please print.

Name: _____

Grade level you will be entering in the 2009 – 2010 school year: _____

School: _____ City/State: _____

Home address: _____ City/State/Zip: _____

Home phone: _____ E-mail: _____

Session you are applying for (*circle one*) FUNDAMENTALS ADVANCED BOTH

Camper's gender (*circle one*) MALE FEMALE

Name of requested suitemate (if any): _____

T-shirt size (*circle one*) XS S M L XL

How did you hear about the TCNJ Robotics Summer Camp? (Please describe)

**Send this form, your current transcript, \$29 application fee* to TCNJ, and a 250 words essay describing why you want to attend and what you expect to gain from the Robotics Summer Camp.
* See payment information.**

Participant Signature Date

Parent/Guardian Name (print)

Parent(s)/Guardian(s) Email Address(es)

Parent/Guardian Signature Date

Name, address, phone number, and e-mail (if available) of Recommender

Please give this part of the form to the teacher or counselor you have asked for a letter of recommendation. Do not forget to sign in the appropriate place below.

**Annual Robotics Summer Camp, July 2009
Letter to Support Application**

Name of Applicant (please print):

Name of Recommender (please print):

To the Recommender:

Please describe the mathematical abilities of the applicant. In particular, discuss your impressions of how she/he might contribute to and benefit from the Robotics Summer Camp. Please write your letter on a separate sheet of paper, attach this form, and send to:

Dr. Orlando Hernandez
Electrical and Computer Engineering
The College of New Jersey
P.O. Box 7718, Ewing, NJ 08628-0718
Email: hernande@tcnj.edu

You may instead fax the form and letter to (609) 637-5148. Letters must be received by May 15, 2009. So that we may contact you if questions arise, please include a telephone number and/or e-mail address in your letter.

Questions? Please call (609) 771-2470 or e-mail hernande@tcnj.edu

Under the Family Education Rights and Privacy Act, students have a right to inspect their files, so that the writer will know if this is a confidential letter, the **student** should sign one of the following statements.

I **DO WAIVE** my right of access to this letter

I **DO NOT WAIVE** my right of access to this letter

Annual Robotics Summer Camp Payment Information, July 2009

Application fee payment: A \$29 application fee must accompany application.

Tuition payment: Tuition payment is not due until after campers have notified of admission, and it is not due until June 15, 2009.

Payments are accepted by check, money order, or credit card.

Check or money orders should be made payable to TCNJ.

Credit Card payments: To comply with the State of New Jersey identity protection laws, it is the policy of TCNJ not to collect credit card information. The camp has partnered with a third party to collect credit card payments via online secure transactions. This third party is A-WIT Technologies, Inc., which also supplies the robots for the camp. If you are paying with a credit card, please submit your payment at the web link below. For the application fee payment, submit a copy of the online receipt with the application.

<http://www.a-wit.com/tcnjrccp>