

- Fill out all student, parent, and payment information on Part I of the application.
- On Part II of the application, mark the classes you would like to attend, noting your top three choices with a 1, 2, and 3. *Please note: if your first choice class is full, you will automatically be placed into your second or third choice unless you check the box at the top of the form, noting that you are only interested in your first choice course(s).*
- Ask your parents to fill out Part III of the application, the medical liability form and publicity waiver. You will not be registered for your course(s) until this form is completed and returned!
- Ask a guidance counselor, teacher, religious or community leader to provide a recommendation as indicated in Part IV. Tear off Part IV, fill in your name and telephone number, and bring it to the person whom you asked for a recommendation. The recommender should fill out Section A, and write a letter of recommendation as described in Section B. Recommendations should be kept confidential and either included in your application packet in a sealed, signed envelope, or mailed separately to the Office of Special Programs.
- Enclose your tuition payment with your completed application and mail to:
 - UR Office of Special Programs
 - ATTN: Rochester Scholars
 - 127 Lattimore Hall / Box 270358
 - Rochester, New York 14627-0358

*Students will not be registered until a complete application, consisting of the application form, tuition payment, letter of recommendation, and medical liability form has been received. All Rochester Scholars (grades 9-12) application materials are due by **Friday, June 13** for Summer Sessions A and/or B. All Rochester Scholars Jr. (grades 6-8) application materials are due by **Friday, June 27**.*

CANCELLATION

Should a student need to cancel his or her registration, please contact the Office of Special Programs at (585) 275-2344.

The University of Rochester reserves the right to cancel courses in the event of under-enrollment or unforeseen circumstances. In such cases, an attempt will be made to place students in equivalent courses. If this is not possible, a full refund will be made.

REFUND SCHEDULE

Cancellations received on or before June 13 (Rochester Scholars Sessions A and/or B) or June 27 (Rochester Scholars Jr. Session) will receive a tuition refund, less a \$25 processing fee.

Cancellations received between June 14 to July 14 (Summer Session A) and June 14 to July 28 (Summer Session B) and June 28 to August 4 (Jr. Summer Session) will be refunded 25% of the tuition fee.

There will be no refunds for cancellations received after July 14 (Summer Session A); after July 28 (Summer Session B); or after August 4 (Jr. Summer Session).

APPLICATION DEADLINE

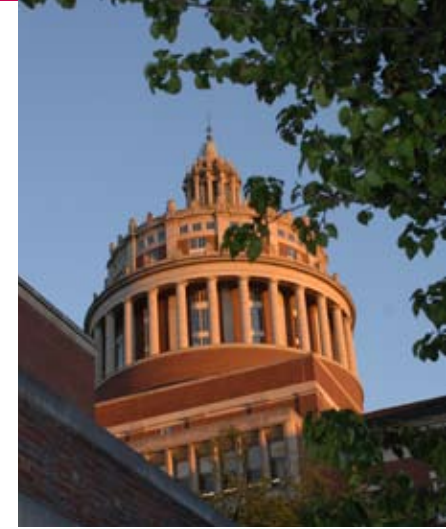
The application deadline is **Friday, June 13** for Rochester Scholars Summer Sessions A and/or B and **Friday, June 27** for the Rochester Scholars Jr. Summer Session. **An application is considered complete when the application form, tuition payment, medical liability form, and letter of recommendation have all been received by the Office of Special Programs.** Enrollment is limited.

Late registrations received after June 13 for Rochester Scholars Summer Sessions A and/or B, and after June 27 for the Rochester Scholars Jr. Summer Session will be accepted for an additional fee of \$25.

Students accepted into the program will be notified by mail approximately two weeks prior to the start of class.

SCHOLARSHIPS

A limited number of scholarships are available and will be awarded on the basis of need and merit. For information and an application, please contact the Office of Special Programs at (585) 275-2344 or visit our website at www.rochester.edu/osp.



Tuition	Half Day	Full
<i>Sessions A & B (Three Weeks)</i>		
Rochester Scholars (students in grades 9–12)	\$ 800	\$ 1,250
*UR Community	\$ 705	\$ 1,120
<i>Session A (Two Weeks)</i>		
Rochester Scholars (students in grades 9–12)	\$ 550	\$ 800
*UR Community	\$ 470	\$ 720
<i>Session B (One Week)</i>		
Rochester Scholars (students in grades 9–12)	\$ 250	\$ 450
*UR Community	\$ 235	\$ 405
<i>Life Sciences Learning Center (Two Weeks)</i>		
		\$ 800
*UR Community		\$ 720
<i>Rochester Scholars Jr. (students in grades 6–8)</i>		
		\$ 450
*UR Community		\$ 405

Books, supplies, and lunch are included with the price of tuition. Students must submit tuition payment with the application for admission.

**Discount for children and grandchildren of UR employees and alumni.*

STUDENT INFORMATION

Student's Name: _____

Birth Date: ____/____/____ Gender: M F Age: _____

Address: _____

City: _____ State: _____ Zip: _____

School: _____ Grade: _____

Parent/Guardian Name: _____

Parent/Guardian Address (if different): _____

Home Phone: () _____ Work Phone: () _____ Cell Phone: () _____

Which number should be used between 8:00 a.m. – 5:00 p.m.?: _____

Parent Email: _____

Student Email: _____

Recommender's Name: _____ Recommender's Phone: () _____

Will you be joining us for lunch (included in price of tuition)? Yes No

How did you find out about the Rochester Scholars program? _____

Were you referred by a past Rochester Scholars student? Yes No
If yes, who? _____

Is there anything else we should know about you? _____

PAYMENT INFORMATION

Applying for Scholarship(s)

If you will be paying the UR Community Rate, are you a:

Staff Member Faculty Member Alumna/us

Department/School: _____ Class Year: _____

Type of Payment: Check Visa MasterCard Discover

Card Number: _____ Exp. Date: ____/____

Name as it appears on Card: _____

Signature: _____

Please note: Credit card payments are recommended for faster processing in the event of a cancellation or refund.

PROGRAM AND COURSE SELECTION

Rochester Scholars (students in grades 9 – 12)

Please select one: One course (morning or afternoon) Two courses (full day)

Please check ONE of the following:

- I have indicated my 1st, 2nd, and 3rd course choices below. I understand that if my first choice course is full, I will be placed into one of my other course choices. **—OR—**
- I am only interested in my first choice course(s). If my first choice is full, please add me to the waiting list. If it is not available, please refund my tuition.

Session A (July 14 – 25)

Morning

- Abnormal Psychology
- American Sign Language: Understanding the Deaf Experience
- Astronomy: Planets, Stars, and NASA
- Bang Your Head! Heavy Metal Music and its History
- Build A Mobile Robot
- Careers in Communications
- Digital Art
- Forensic Files: The CSI Phenomenon
- How to Write a College Essay and Succeed!
- The Life and Times of Wonder Woman
- What's Up Doc? Exploring the Pre-med Experience

Afternoon

- Argument and Debate: How to Argue and Win!
- As Easy As Saying Sushi: An Introduction To Japanese
- Careers in Engineering: An Introduction to the Field of Engineering
- Light and Optics
- Linked Fate: Energy, Equity, and Global Energy Transitions
- Natural Born Killers: Man, Microbes, and Diseases
- Oh, the Humanity! Genetics, Robots, and Science Fiction in the 21st Century
- Sports Marketing
- What's Up Doc? Exploring the Pre-med Experience
- Why We Play? The Psychology of Video Games
- Writing the Hollywood Screenplay

Session B (July 28 – August 1)

Morning

- Abnormal Psychology
- American Sign Language: Understanding the Deaf Experience
- Astronomy: Planets, Stars, and NASA
- Build A Mobile Robot
- Can You Hear Me Now? How Humans Perceive and Localize Sounds
- Careers in Communications
- Ceramic Handbuilding
- Digital Art
- Exploring Engineering Careers and Technological Innovations
- Game Theory
- Getting Answers to Life's Big Questions: Psychological Research
- Musical Theater: Broadway and Beyond
- Rochester CSI
- The Life and Times of Wonder Woman
- Understanding Animal Behavior
- What's Up Doc? Exploring the Pre-med Experience

Afternoon

- As Easy As Saying Sushi: An Introduction To Japanese
- Careers in Education
- Careers in Engineering: An Introduction to the Field of Engineering
- Careers in Psychology
- Ceramic Handbuilding
- Light and Optics
- Making the Hollywood Movie (pre-req: Writing the Hollywood Screenplay)
- Music and Society
- Oh, the Humanity! Genetics, Robots, and Science Fiction in the 21st Century
- Sports Marketing
- The Magic of Molars and the Wisdom of Teeth: Exploring Oral Health
- Warfare: Past, Present, and Future
- What's Up Doc? Exploring the Pre-med Experience
- Why We Play? The Psychology of Video Games

PROGRAM AND COURSE SELECTION

Rochester Scholars Jr. (students in grades 6 – 8)

Please check ONE of the following:

- I have indicated my 1st, 2nd, and 3rd course choices below. I understand that if my first choice course is full, I will be placed into one of my other course choices. **—OR—**
- I am only interested in my first choice course(s). If my first choice is full, please add me to the waiting list. If it is not available, please refund my tuition.

Summer Session (August 4 – 8)

- ___ Astronomy: Planets, Stars, & NASA
- ___ Authors of Tomorrow: A Course in Creative Writing
- ___ Build a Mobile Robot
- ___ Ceramic Handbuilding
- ___ Ecology & Microbiology
- ___ Exploring Engineering Careers and Technological Innovations
- ___ May It Please the Court: A Mock Drama
- ___ Read It, Write It, SLAM IT! An Introduction to Poetry
- ___ Summer Science Explorers: Food Science
- ___ The World of Magic
- ___ This Just In: An Introduction to Journalism



Life Sciences Learning Center (students in high school)

- ___ Summer Science Academy

Prerequisite: Completion of Regents Biology Course

MEDICAL LIABILITY FORM AND PUBLICITY WAIVER

Parent/Guardian Name: _____

Emergency Contact Person

Name: _____ Relationship: _____

Home Phone: () _____ Work Phone: () _____ Cell Phone: () _____

Which number should be used between 8:00 a.m. – 5:00 p.m.?: _____

Insurance

The program does not provide accident and health insurance. Participants are required to provide their own coverage.

Insurance Carrier: _____ Policy Number: _____

Subscriber's Name: _____

Primary Care Physician: _____ Physician's Phone: () _____

Medical Information

Please list any allergies: _____

Does your child wear contact lenses, a hearing aid, or other assistant device? Yes No

Does your child have a chronic disease or condition that we should be aware of? Yes No

Does your child have any special needs? Yes No

If you answered yes to any of the above questions, please specify: _____

Medication Waiver (if applicable)

Please indicate if your child needs to have medication administered to him/her as needed.

My child _____ needs _____ medication administered at _____ each day.

In the event a bee stings my child _____, I request that the Office of Special Programs administer a medication that I have provided.

I acknowledge that the Office of Special Programs is administering this medication in order to accommodate my child's medical condition and solely as the result of my request. I understand that trained medical personnel will not administer the medication and I assume any and all risks whatsoever.

Signature: _____ Date: ____/____/____

Statement of Risk and Liability, Certificate of Health Emergency Waiver

In consideration for allowing _____ to participate in the University of Rochester, Rochester Scholars, I, as his/her parent/guardian represent and affirm to the University of Rochester that:

1. I understand that participating in any activity involves a risk of injury or harm.
2. All such risks are being assumed knowingly and voluntarily, including but not limited to those associated with travel to and from the Program.
3. I certify that my child is in good health and has no physical condition that would prevent him/her from participating in the Program.
4. In the event of the Program's inability to locate me, or the emergency contact designee, I give permission to the Program Authorities to take such emergency measures, as they deem appropriate, until such time as emergency contact designee or myself can be contacted.
5. I will not hold the University, its employees, and agents responsible for any injury or other harm that results from Program participation.

Signature: _____ Date: ____/____/____

PERMISSIONS

Publicity

Students participating in Rochester Scholars may have opportunities to speak about their experience with the Program to the media during in-school presentations and for other publicity related events.

- I agree to allow my child to participate in publicity opportunities for the Rochester Scholars Program.
- I do not want my child to participate in publicity opportunities for the Rochester Scholars Program.
- Check this box if you agree to allow your child to participate in the Rochester Scholars Alumni Directory.

Field Trips

- I give my child permission to leave the UR grounds with his/her teacher and classroom assistant using official University transportation.
- My child does not have permission to leave the UR grounds.

Signature: _____ Date: ____/____/____

TEACHER RECOMMENDATION

I am applying to the Rochester Scholars program at the University of Rochester. As part of the application process I am asking for a recommendation. The application and recommendation deadline is **Friday, June 13** for high school students (entering grades 9-12), and **Friday, June 27** for middle school students (entering grades 6-8). The recommendation should remain confidential. Please fill out this form, attach it to your letter of recommendation, include your contact information (name, title, employer, phone number, and email address), and return to me in a sealed, signed envelope. Or, you can mail, fax, or email to:

UR Office of Special Programs
 RE: RS Recommendation
 127 Lattimore Hall/ Box 270358
 Rochester, New York 14627-0358
 (585) 275-2344 (phone)
 (585) 461-5901 (fax)
 osp@rochester.edu

Student Name: _____

Student Phone Number: () _____

Session (Circle One): Summer A Summer B Jr. Summer Session

Course(s): _____

Section A

Please rank this student for the characteristics listed below using a scale of 1-5, with 5 being excellent and 1 being below average.

- | | |
|----------------------------|---|
| _____ Curiosity | _____ Attention Span |
| _____ Motivation | _____ Analytical Skills |
| _____ Reading Skills | _____ Following Instruction |
| _____ Positive Attitude | _____ Careful with Materials |
| _____ Social Relationships | _____ Respects and Cooperates with Peers and Teachers |
| _____ Maturity | |

Recommender Name: _____

Employer: _____ Title: _____

Contact Phone: _____ Email: _____

Section B

The Rochester Scholars and Rochester Scholars Jr. Programs are designed for bright, talented, and capable students, who are sincerely interested in the courses being offered. The letter should address how long you have known the student and in what context, his or her academic abilities, level of maturity, and other characteristics that demonstrate he or she is a good candidate for the Program.